

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003600

Entity Name: MIAMI-DADE COUNTY PODIATRIC MEDICAL ASSOCIATION, CORP.

FILED
Apr 10, 2023
Secretary of State
0250007796CC

Current Principal Place of Business:

3375-F CAPITAL CIRCLE NE
SUITE 201
TALLAHASSEE, FL 32308

Current Mailing Address:

3375-F CAPITAL CIRCLE NE
SUITE 201
TALLAHASSEE, FL 32308 US

FEI Number: 59-1235979

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINN, JASON DAVID ESQ.
2709 KILLARNEY WAY
SUITE 4
TALLAHASSEE, FL 32309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JASON D. WINN, ESQ

04/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CORETTI, NICHOLAS J III
Address 9600 NE 2ND AVE
City-State-Zip: MIAMI SHORES FL 33138

Title PRESIDENT
Name CLERSAINT, LUCITA M
Address 58 NE 167TH STREET
City-State-Zip: MIAMI FL 33162

Title TREASURER, SECRETARY
Name MASRI, AMAL
Address 16800 NW 2ND AVE
309
City-State-Zip: NORTH MIAMI BEACH FL 33169

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUCITA M. CLERSAINT

PRESIDENT

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date