

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28456

Entity Name: FLORIDA VASCULAR SOCIETY, INC.**Current Principal Place of Business:**400 CAPITAL CIRCLE, SE
SUITE 18307
TALLAHASSEE, FL 32301**Current Mailing Address:**400 CAPITAL CIRCLE, SE
SUITE 18307
TALLAHASSEE, FL 32301 US**FEI Number:** 59-2916514**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE, ELLIS & MCDUFFIE, CPAS
2627 MITCHAM DRIVE
TALLAHASSEE, FL 32308 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name RISLEY, GEOFFREY DR.
Address 1824 KING ST
 SUITE 200
City-State-Zip: JACKSONVILLE FL 33204

Title COUN
Name WATCH, LIBBY DR.
Address 8950 NORTH KENDALL DRIVE
 #504-@
City-State-Zip: MIAMI FL 33176

Title VP
Name HERTZ, JEFFREY A. DR.
Address 3850 HOLLYWOOD BLVD.
 302
City-State-Zip: HOLLYWOOD FL 33021

Title OTHER
Name ZELTZER, JACK DR.
Address 176 AAKRON ROAD
City-State-Zip: LAKE WORTH FL 33414

Title COUN
Name THOMPSON, CHARLES DR.
Address 80 W. MICHIGAN STREET
City-State-Zip: ORLANDO FL 32806

Title TREASURER
Name NAIR, DEEPAK DR.
Address 600 N CATTLEMAN RD
 SUITE 220
City-State-Zip: SARASOTA FL 34232

Title EXECUTIVE DIRECTOR
Name SULLIVAN-BURKHARDT, LIZ
Address 400 CAPITAL CIRCLE SE
 SUITE 18307
City-State-Zip: TALLAHASSEE FL 32301

Title OTHER
Name CHAHWAN, SANTIAGO DR.
Address 2350 VANDERBILT BEACH ROAD
 SUITE 303
City-State-Zip: NAPLES FL 34109

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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: LIZ SULLIVAN-BURKHARDT**DIRECTOR****02/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	ILLIG, KARL DR.
Address	2 TAMPA GENERAL CIRCLE STC 7016
City-State-Zip:	TAMPA FL 33606