

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46657

FILED
Jan 06, 2023
Secretary of State
6619019625CC

Entity Name: DISTRICT XI FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION, INCORPORATED.

Current Principal Place of Business:

402 SE 15TH ST
CAPE CORAL, FL 33990

Current Mailing Address:

POST OFFICE BOX 101409
CAPE CORAL, FL 33910-1409

FEI Number: 65-0370778

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CENTAFONT, NICHOLAS FDO
13290 IDLEWILD RD
FORT MYERS, FL 33905 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 P
Name BURDZY, JON D.O.
Address 7780 CAMBRIDGE MANOR PLACE,
STE C
City-State-Zip: FT MYERS FL 33907

Title VP
Name SWARTZ, FRANCESCA D.O.
Address 13691 METRO PKWY., #400
City-State-Zip: FT. MYERS FL 33912

Title S
Name MASON, KERI D.O.
Address 3010 LAKE BUTLER COURT
City-State-Zip: CAPE CORAL FL 33909

Title T
Name USBERGH, JR., EUGENE DO,
Address 14801 PALM BEACH BLVD
City-State-Zip: FORT MYERS FL 33905

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: JON BURDZY, DO

P

01/06/2023

Electronic Signature of Signing Officer/Director Detail

Date