

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001976

Entity Name: FLORIDA UROLOGICAL SOCIETY, INC.

Current Principal Place of Business:

1100 E. WOODFIELD ROAD
SUITE 350
SCHAUMBURG, IL 60173

Current Mailing Address:

1100 E. WOODFIELD ROAD
SUITE 350
SCHAUMBURG, IL 60173 US

FEI Number: 59-6142159

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE ACCESS, INC.
236 E. 6TH AVENUE
TALLAHASSEE, FL 32303 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 BIRD, VINCENT MD
Address 1600 SW ARCHER RD
 PO BOX 100247
City-State-Zip: GAINESVILLE FL 32610-0247

Title EXECUTIVE COMMITTEE MEMBER
Name BINDER, MICHAEL MD
Address NORTH FLORIDA/SOUTH GEORGIA
 VETERANS HEALTH SYSTEM
 1601 SW ARCHER ROAD
City-State-Zip: GAINESVILLE FL 32608

Title SECRETARY
Name SEXTON, WADE MD
Address H LEE MOFFITT CANCER CENTER
 12902 MAGNOLIA DRIVE
City-State-Zip: TAMPA FL 33612

Title EXECUTIVE DIRECTOR
Name WEISER, WENDY J
Address 1100 E WOODFIELD RD, STE 520
City-State-Zip: SCHAUMBURG IL 60173

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: WENDY WEISER

DIRECTOR

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date