

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33185

Entity Name: AMERICAN SOCIETY OF PODIATRIC MEDICINE, INC.**Current Principal Place of Business:**2757 CENTER COURT DRIVE
WESTON , FL 33332**Current Mailing Address:**2757 CENTER COURT DRIVE
WESTON, FL 33332 US**FEI Number:** 22-2403001**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SIMMONDS, WARREN LDPM
2757 CENTER COURT DRIVE
WESTON , FL 33332 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 UDELL, ELIOTT DPM
Address 120 BETHPAGE ROAD
City-State-Zip: HICKSVILLE NY 11801

Title VICE PRESIDENT
Name HERTZBERG, ABRAHAM DPM
Address 300 FRANKLIN AVENUE
City-State-Zip: VALLEY STREAM NY 11580

Title EXECUTIVE DIRECTOR
Name SIMMONDS, WARREN L., DPM
Address 1614 SHERIDAN STREET
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name BOXER, MIRON DPM
Address 2 WOODMERE BLVD. SOUTH
City-State-Zip: WOODMERE FL 11598

Title SECRETARY
Name ARMSTRONG, ALBERT VDPM
Address 4701 N. MERIDIAN AVE # LEVEL E
City-State-Zip: MIAMI BEACH FL 33140-2910

Title DIRECTOR
Name MARCUS, ROBERT DPM
Address 185 SEDAR LANE
City-State-Zip: TEANECK NJ 07666

Title DIRECTOR
Name HELFAND, ARTHUR E D.P.M.
Address 9 HANSEN CT
City-State-Zip: NARBERTH PA 19072-1712

Title DIRECTOR
Name MALLIN, HOWARD D.P.M.
Address 2250 BEAR DEN RD
 SUITE 102
City-State-Zip: FREDERICK MD 21701-9408

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: WARREN L. SIMMONDS, DPM**EXECUTIVE DIRECTOR****03/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date