

2022 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	Title	VICE PRESIDENT
Name	UDELL, ELIOTT DPM	Name	HERTZBERG, ABRAHAM DPM
Address	120 BETHPAGE ROAD	Address	300 FRANKLIN AVENUE
City-State-Zip:	HICKSVILLE NY 11801	City-State-Zip:	VALLEY STREAM NY 11580
Title	EXECUTIVE DIRECTOR	Title	DIRECTOR
Name	SIMMONDS, WARREN L., DPM	Name	BOXER, MIRON DPM
Address	1614 SHERIDAN STREET	Address	2 WOODMERE BLVD. SOUTH
City-State-Zip:	HOLLYWOOD FL 33021	City-State-Zip:	WOODMERE FL 11598
Title	SECRETARY	Title	DIRECTOR
Name	ARMSTRONG, ALBERT VDPM	Name	MARCUS, ROBERT DPM
Address	4701 N. MERIDIAN AVE # LEVEL E	Address	185 SEDAR LANE
City-State-Zip:	MIAMI BEACH FL 33140-2910	City-State-Zip:	TEANECK NJ 07666
Title	DIRECTOR	Title	DIRECTOR
Name	HELFAND, ARTHUR E D.P.M.	Name	MALLIN, HOWARD D.P.M.
Address	9 HANSEN CT	Address	2250 BEAR DEN RD SUITE 102
City-State-Zip:	NARBERTH PA 19072-1712	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 SIMMONDS**EXECUTIVE DIRECTOR****02/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date