

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 05, 2013
Secretary of State
CC8594677377

Entity Name: CALIFORNIA CHAPTER OF THE AMERICAN ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS, INC.

Current Principal Place of Business:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202

Current Mailing Address:

245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202 US

FEI Number: 01-0676431

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, DONALD C
245 RIVERSIDE AVE
SUITE 200
JACKSONVILLE, FL 32202 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 IMMEDIATE PAST PRESIDENT
Name ZIGRANG, WILLIAM MD
Address 1750 EL CAMINO REAL, SUITE 202
City-State-Zip: BURLINGAME CA 94010

Title PRESIDENT
Name BAILEY, TIMOTHY SMD
Address 700 WEST EL NORTE PARKWAY,
SUITE 201
City-State-Zip: ESCONDIDO CA 92026

Title TREASURER
Name BOHANNON, NANCY JMD
Address 1580 VALENCIA STREET, ROOM 504
City-State-Zip: SAN FRANCISCO CA 94110

Title VP
Name GUERIN, CHRIS MD
Address 3927 WARING ROAD SUITE C
City-State-Zip: OCEANSIDE CA 92056

Title CEO
Name JONES, DONALD C
Address 245 RIVERSIDE AVE, SUITE 200
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY
Name BUSH, MICHAEL A MD
Address 8920 WILSHIRE BOULEVARD
SUITE 635
City-State-Zip: BEVERLY HILLS CA 90211

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: DONALD C JONES

CEO

04/05/2013

Electronic Signature of Signing Officer/Director Detail

Date