2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State
04-28-2005 90206 033 ***150.00

DOCUMENT # 600835

1. Entity Name
CENTRAL FLORIDA CARDIOLOGY GROUP, P.A.

14005918

04202005 Chg-P CR2E034 (10/03)

Principal Place of Business	Mailing Address
500 E COLONIAL DR ORLANDO, FL 32803	500 E COLONIAL DR ORLANDO, FL 32803

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1232309 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TAUSSIG, ANDREW S MD
500 EAST COLONIAL DR.
ORLANDO, FL 32803

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP TAUSSIG, ANDREW S 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS STORY, WILLIAM E 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT POLLAK, SCOTT J 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV WHITWORTH, HALL B JR 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV RODRIGUEZ, A. RALPH 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV MAY, GREGORY A 500 E COLONIAL DR ORLANDO, FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/25/05 407 841-7151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CENTRAL FLORIDA CARDIOLOGY GROUP, P.A.
DOCUMENT # 600835
2005 UNIFORM BUSINESS REPORT (UBR)
BLOCK 10

TITLE	NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	
DIR/ VICE PRES	CRAIG BARNETT	500 E. COLONIAL DR	ORLANDO	FLORIDA	32803	ADDITION
DIR/ VICE PRES	ANIL KUMAR	500 E. COLONIAL DR	ORLANDO	FLORIDA	32803	ADDITION
DIR/ VICE PRES	MICHAEL HARDEE	500 E. COLONIAL DR	ORLANDO	FLORIDA	32803	ADDITION
DIR/ VICE PRES	BRUCE STEIN	500 E. COLONIAL DR	ORLANDO	FLORIDA	32803	ADDITION

ATTACHMENT
600835
1405918