

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90102 042 ****70.00

DOCUMENT # N93000001888

1. Entity Name

**PHYSICIAN HOSPITAL ORGANIZATION OF SOUTH PINELLA
 S, INC.**

Principal Place of Business

**3001 W. DR. MARTIN LUTHER KING JR. BLVD.
 MAB - 3RD FLOOR - PHO
 TAMPA FL 33607**

Mailing Address

**3001 W. DR. MARTIN LUTHER KING JR. BLVD.
 MAB - 3RD FLOOR - PHO
 TAMPA FL 33607**

2. Principal Place of Business

3. Mailing Address

701 6th Street South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

701 6th Street South

City & State

City & State

St. Petersburg FL

St. Petersburg FL

Zip

Country

Zip

Country

33701

USA

33701

USA

4. FEI Number

59-3184319

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Mr. Robert W. Thornton

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

701 6th Street South

City

St. Petersburg

FL

Zip Code

33701

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

ROBERT W. THORNTON, DIRECTOR

4/30/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
 NAME **MILLER, ROBERT M.D.**
 STREET ADDRESS **1301 5TH AVENUE NORTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33705**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VD** ☐ Delete
 NAME **EGAN, THOMAS M.D.**
 STREET ADDRESS **1201 5TH AVENUE N., #509**
 CITY-ST-ZIP **ST PETERSBURG FL 33705**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **SD** ☐ Delete
 NAME **REILLY, MICHAEL M.D.**
 STREET ADDRESS **1201 FIFTH AVE N-STE 401**
 CITY-ST-ZIP **ST PETERSBURG FL 33705**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **CD** ☒ Delete
 NAME **PEARLSTEIN, LESLIE M.D.**
 STREET ADDRESS **603 7TH STREET SOUTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE **D** ☐ Change ☒ Addition
 NAME **ROBERT W. THORNTON**
 STREET ADDRESS **701 - 6TH STREET SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

TITLE **SD** ☐ Delete
 NAME **RAGSDALE, REX M.D.**
 STREET ADDRESS **701 6TH STREET SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33701**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **TD** ☐ Delete
 NAME **GORDON, MARK M.D.**
 STREET ADDRESS **601 7TH STREET SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33701**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 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 617, 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

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT W. THORNTON

04/30/02

(727) 893-6698

Date

Daytime Phone #

CR2E037 (9/01)

Physician Hospital Organization of South Pinellas, Inc.

2002 Board of Directors Contact Information

Date: 4/29/02

ATTACH # N9300000/888/656/57

BMC/SAH
Yes No

Class A Directors - PCP's

	Phone	Fax	Specialty	Yes	No
Mehul Shah, MD 1111 7th Avenue North #107 St. Petersburg, FL 33705	727-894-1661	727-894-1430	Internal Medicine		
Barry Blacker, MD 5353 1st Avenue South St. Petersburg, FL 33707	727-321-4253	727-323-5244	Pediatrics		
Keith Brady, MD (Irene) 601 7th Street South St. Petersburg, FL 33701	727-824-7124	727-824-7107	Internal Medicine		
G. Anthony Figueroa, MD (Tammy) 1201 5th Avenue North, # 300 St. Petersburg, FL 33705	727-895-4500	727-894-2037	Family Medicine		
Pedro Morales, MD (Allison) 2191 9th Avenue North Suite 220 St Petersburg, FL 33713	727-327-9667 727-321-3938	727-321-1655	Family Medicine		
Gregory Nestor, MD (Sheila) 5425 Park Street North Suite 6-W St. Petersburg, FL 33709	727-547-0825	727-547-0523	Internal Medicine		
Michael T. Reilly, MD 1201 5th Avenue North, #401 St. Petersburg, FL 33705	727-821-1132	727-822-2977	Family Medicine		

Class A Directors - Specialists

Thomas Egan, MD 800 2nd Avenue South, Suite 210 St. Petersburg, FL 33701	727-825-1040 (does his own scheduling)	727-827-5155 825-1389	Radiology		
Mark Gordon, MD (Pat) Treasurer 601 7th Street South St. Petersburg, FL 33701	727-824-7146	727-824-7119	Urology		
Michael Mc Ivor, MD 900 Central Avenue St. Petersburg, FL 33705	727-823-4278	727-898-5638	Cardiology		
Robert Miller, MD (Eileen) Vice-Chair 1301 5th Avenue North St. Petersburg, FL 33705	727-825-1253	727-825-1332	Radiology		
Leslie Pearlstein, MD (Lois) Chairman 603 7th Street South St. Petersburg, FL 33701	727-895-7200	727-898-8815	General Surgery		
Larry R. Williams, MD (Anne) 1111 7th Ave North, # 105 St. Petersburg, FL 33705	727-894-4738	727-823-6710	General Surgery		

Class B Directors

Teresa Bradley, MD	727-825-1284	727-825-1385	Emergency Medicine		
Rex Ragsdale, MD (Gil)	727-825-1074	727-825-1230	BSA VP Medical Affairs		
Scott Sinigalliano	727-893-6786	727-553-7942	Pharmacy/Cardiopulmonary		
Bob Thornton (Gigi)	727-893-6698	727-893-6085	CFO, BSA		

Diane Razmierski

813 554-9329 813-870 4017

VP Managed Care
Baycare Health System

Quorum: Majority of Class "A" = 7

Majority of Class "B" = 3