

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90047 047 \*\*\*150.00

**DOCUMENT # V50817**  
 1. Entity Name  
 NAPLES MEDICAL CENTER, P.A.



Principal Place of Business  
 400 8TH STREET NORTH  
 NAPLES, FL 34102

Mailing Address  
 400 8TH STREET NORTH  
 NAPLES, FL 34102

40070610



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04102008 Chg-P CR2E034 (12/06)

**6. Name and Address of Current Registered Agent**  
 GALBUT, ALAN MD  
 400 8TH ST N  
 NAPLES, FL 34102

4. FEI Number  
 65-0332909

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	PARENT, THOMAS	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	P	<input type="checkbox"/> Delete
NAME	GALBUT, ALAN	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORRIS, DANIEL J M.D.	
STREET ADDRESS	400 8TH ST NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROLAND, RICHARD M M.D.	
STREET ADDRESS	400 8TH ST NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete
NAME	MATHIEU, VLADIMIR J	
STREET ADDRESS	400 8TH ST NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE		<input type="checkbox"/> Delete
NAME	<i>See additional list attached</i>	
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VP MATHIEU, VLADIMIR J	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	400 8TH ST NORTH	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** ALAN GALBUT Date: 4/11/08 Daytime Phone #: 239-430-5548

# ATTACHMENT

40073278

Additional Directors 2008 Annual Report

Naples Medical Center PA  
Document# V50817

D  
Bialkin, Steven  
400 8th Street, North  
Naples FL, 34102

D  
Boynton, Douglas  
400 8th Street, North  
Naples FL, 34102

D  
Cohen, Harley  
400 8th Street, North  
Naples FL, 34102

D  
Cugini, Christy  
400 8th Street, North  
Naples FL, 34102

D  
DeLeon, Cesar  
400 8th Street, North  
Naples FL, 34102

D  
Drew, Daniel **Delete**  
400 8th Street, North  
Naples FL, 34102

D  
Duncan, Raymond  
400 8th Street, North  
Naples FL, 34102

D  
Grossman, Joel  
400 8th Street, North  
Naples FL, 34102

D  
Gudur, Kavitha  
400 8th Street, North  
Naples FL, 34102

D  
Harcourt, Karen **Delete**  
400 8th Street, North  
Naples FL, 34102

ST  
Harrington, Douglas  
400 8th Street, North  
Naples FL, 34102

D  
Irani, Farhad  
400 8th Street, North  
Naples FL, 34102

D  
Kerns, Albert  
400 8th Street, North  
Naples FL, 34102

D  
Laskowski, William  
400 8th Street, North  
Naples FL, 34102

D  
Medina, Tyrone  
400 8th Street, North  
Naples FL, 34102

D  
Owens, Alex  
400 8th Street, North  
Naples FL, 34102

D  
Shields, Paul  
400 8th Street, North  
Naples FL, 34102

D  
Underwood, C.Richard  
400 8th Street, North  
Naples FL, 34102

D  
Wise, Kendall  
400 8th Street, North  
Naples FL, 34102