

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673295

Entity Name: PEDIATRIX MEDICAL GROUP OF FLORIDA, INC.

Current Principal Place of Business:

1301 CONCORD TERRACE
SUNRISE, FL 33323

Current Mailing Address:

1301 CONCORD TERRACE
SUNRISE, FL 33323 US

FEI Number: 59-2013191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 AUTHORIZED SIGNATORY
Name CLARK, REESE H.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title SECRETARY
Name ANDREANO, DOMINIC J.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR
Name LOPEZ-BLANCO, VIVIAN
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title PRESIDENT
Name STANLEY, MICHAEL D.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name CLARK, DAVID A.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name COLLINS, STEVEN C.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name OLIVER, ALAN B.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name DEL TORO, JORGE I.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOMINIC J. ANDREANO

SECRETARY

04/17/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name OLIVER, ALAN B.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title TREASURER
Name LOPEZ-BLANCO, VIVIAN
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name HAWK, WILLIAM C.
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name DVORA, YAIR
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name TURNER, VICKY
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323

Title AUTHORIZED SIGNATORY
Name MASON, ERIC
Address 1301 CONCORD TERRACE
City-State-Zip: SUNRISE FL 33323