FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

0140010

PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

99 APR 15 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 600121

1. Corporation Name
SHERIDAN HEALTHCORP, INC.

Principal Place of Business
EMERALD HILLS EXECUTIVE PLAZA TWO
4651 SHERIDAN STREET. SUITE 400
HOLLYWOOD FL 33021

Mailing Address
EMERALD HILLS EXECUTIVE PLAZA TWO
4651 SHERIDAN STREET. SUITE 400
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
04/06/1962

4. FEI Number
59-0971075 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
MARTUS, JAY A ESQ.
4651 SHERIDAN ST., SUITE 400
HOLLYWOOD, FL FL 33021

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	[ ] DELETE	1.1 TITLE	[ ] Change [ ] Addition
NAME	EISENBERG, MITCHELL		1.2 NAME	400002841424---7
STREET ADDRESS	4651 SHERIDAN STREET, SUITE 400		1.3 STREET ADDRESS	-04/16/99--01008--012
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP	***4350.00 ****150.00
TITLE	EVPD	[ ] DELETE	2.1 TITLE	[ ] Change [ ] Addition
NAME	GOLD, LEWIS		2.2 NAME	
STREET ADDRESS	4651 SHERIDAN STREET, SUITE 400		2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-ST-ZIP	
TITLE	VP/S	[ ] DELETE	3.1 TITLE	[X] Change [ ] Addition
NAME	MARTUS, JAY A		3.2 NAME	
STREET ADDRESS	4651 WHERIDAN STREET, SUITE 400		3.3 STREET ADDRESS	4651 SHERIDAN STREET, SUITE 400
CITY-ST-ZIP	HOLLYWOOD FL		3.4 CITY-ST-ZIP	
TITLE	C	[ ] DELETE	4.1 TITLE	C.00 [X] Change [ ] Addition
NAME	SCHUNDLER, MICHAEL		4.2 NAME	
STREET ADDRESS	4651 SHERIDAN STREET, SUITE 400		4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33021		4.4 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME	GOLEMBESKY, HENRY		5.2 NAME	
STREET ADDRESS	5290 MOUNT ARIANE COURT		5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA		5.4 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME	NATKOW, NEIL		6.2 NAME	
STREET ADDRESS	4651 SHERIDAN STREET, SUITE 400		6.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33021		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERIDAN HEALTHCORP, INC. By Jay A. Martus, V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jay A. Martus, VP

April 13, 1999
Date

(954)986-7770
Daytime Phone #

CR2E034 (11/98)