

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601023

FILED  
Jan 19, 2004  
Secretary of State

**Entity Name:** ANESTHESIOLOGY ASSOCIATES OF THE PALM BEACHES, P.A.

**Current Principal Place of Business:**

1411 N FLAGLER DR  
SUITE 4000  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

1411 N FLAGLER DR  
SUITE 4000  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

**FEI Number:** 59-1262212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SINGER, MICHAEL S ESQ  
3401 PGA BLVD  
SUITE 802  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

SINGER, MICHAEL S ESQ  
3401 PGA BLVD  
SUITE 604  
PALM BEACH GARDENS, FL 33410 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:

01/19/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROLLINS, HOWARD,  
Address: 12901 BRYNWOOD  
City-St-Zip: PALM BEACH GDNS, FL

Title: TD ( ) Delete  
Name: AMADO, JEFFREY A  
Address: 18 CAYMAN PLACE  
City-St-Zip: PALM BCH GARDENS, FL

Title: SD ( ) Delete  
Name: RODMAN, RICHARD  
Address: 233 LA PUERTA WAY  
City-St-Zip: PALM BEACH, FL

Title: VPD ( ) Delete  
Name: WEIDENBAUM, WAYNE S  
Address: 1 DUNBAR RD  
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: VPD ( ) Delete  
Name: UNTRACHT, MITCHEL S  
Address: 5723 HIGH FLYER RD  
City-St-Zip: WEST PALM BEACH, FL 33418

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ROLLINS, HOWARD C  
Address: 12901 BRYNWOOD  
City-St-Zip: PALM BEACH GDNS, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD ( ) Change (X) Addition  
Name: DUNCAN, ROGER L  
Address: 204 SEAGULL PT  
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOWARD C ROLLINS

PD

01/19/2004

Electronic Signature of Signing Officer or Director

Date