

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 11, 2005 8:00 am**  
**Secretary of State**

03-11-2005 90311 046 \*\*\*150.00

<b>DOCUMENT # 602089</b> 1. Entity Name <b>CARDIOLOGY ASSOCIATES OF ORLANDO, P.A.</b>					
Principal Place of Business <b>60 W GORE ST ORLANDO, FL 32806-1114 US</b>			Mailing Address <b>60 W GORE ST ORLANDO, FL 32806-1114 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01112005    Chg-P    CR2E034 (10/03)	
Zip		Country		4. FEI Number <b>59-1292958</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>GREENWOOD, SCOTT D 60 W GORE STREET ORLANDO, FL 32806-1114</b>				Name Street Address (P.O. Box Number is Not Acceptable) City	
				<b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S	<input type="checkbox"/> Delete →	TITLE	Assistant Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDREAE, GEORGE E		NAME		
STREET ADDRESS	60 W GORE ST		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32806		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete →	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, MELVIN J		NAME		
STREET ADDRESS	60 W GORE ST		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32806		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete →	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENWOOD, SCOTT D.		NAME		
STREET ADDRESS	60 W GORE ST		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32806		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete →	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINSTEIN, IRWIN R.		NAME		
STREET ADDRESS	60 W GORE ST		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32806		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete →	TITLE	Assistant Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAPMAN, ENRIQUE		NAME		
STREET ADDRESS	60 W GORE ST		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32806		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete →		TITLE		
NAME	SEE MORE		NAME	ATTACHED	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			3/8/05    407 628 1300 <small>Date    Daytime Phone #</small>		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Mantecon, Israel J. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice President Domesczek, Ronald R. 60 W Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Duran, Aurelio 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice President Alvarez, Luis G. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Lefran, Jose A. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Filart, Roland A. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

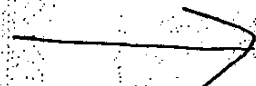
ATTACHMENT

40031055

# 602089

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Guguchev, Pavel A. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice President Shroff, Sanjeev K. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Tarver, III, James H. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Cheung, Peter 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Maniar, Perimal B. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Auerbach, Eric G. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

CONTINUED



ATTACHMENT

40031055

# 602089

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS BY		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Partain, Jonathan O. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Jaffe, Linda E. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Dalton, Robert P. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Steiner, Mark A. 60 W. Gore St. Orlando, FL 32806	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS BY		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

# ATTACHMENT

## Orlando Heart Center

### PA Ownership

As of 2/1/05

400 81055  
# 602089

<u>Physician Name</u>	<u>% Ownership</u>	<u>Title</u>
✓ Irwin R. Weinstein, MD	6.25%	President
✓ Israel J. Mantecon, MD	6.25%	1 <sup>st</sup> Vice President
✓ Melvin J. Johnson III, MD	6.25%	2 <sup>nd</sup> Vice President
✓ Scott D. Greenwood, MD	6.25%	3 <sup>rd</sup> Vice President
✓ Ronald R. Domescek	6.25%	4 <sup>th</sup> Vice President
✓ Aurelio Duran	6.25%	5 <sup>th</sup> Vice President
✓ Luis G. Alvarez, MD	6.25%	6 <sup>th</sup> Vice President
✓ Jose A. Lefran, MD	6.25%	7 <sup>th</sup> Vice President
✓ Roland A. Filart, MD	6.25%	8 <sup>th</sup> Vice President
✓ Pavel A. Guguchev, MD	6.25%	9 <sup>th</sup> Vice President
✓ Sanjeev K. Shroff, MD	6.25%	10 <sup>th</sup> Vice President
✓ James H. Tarver III, MD	6.25%	11 <sup>th</sup> Vice President
✓ Peter Cheung, MD	0.00%	12 <sup>th</sup> Vice President
✓ Parimal B. Maniar, MD	0.00%	13 <sup>th</sup> Vice President
✓ Eric G. Auerbach, MD	0.00%	14 <sup>th</sup> Vice President
✓ Jonathan O. Partain, MD	0.00%	15 <sup>th</sup> Vice President
✓ Linda E. Jaffe, MD	0.00%	16 <sup>th</sup> Vice President
✓ Robert P. Dalton, MD	6.25%	Secretary
✓ George E. Andreae, MD	6.25%	Assistant Secretary
✓ Mark A. Steiner, MD	6.25%	Treasurer
✓ Enrique Chapman, MD	<u>6.25%</u> 100%	Assistant Treasurer