

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707228

FILED
Jan 29, 2004
Secretary of State**Entity Name:** THE CHILDREN'S PSYCHIATRIC CENTER, INC.**Current Principal Place of Business:**15490 N.W. 7TH AVENUE, SUITE 200
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**15490 N.W. 7TH AVENUE, SUITE 200
MIAMI, FL 33169**New Mailing Address:****FEI Number:** 59-0866060**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LOVELL, TERRY M
150 WEST FLAGLER STREET, SUITE 2200
MIAMI, FL 33130 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: HARRIS, GLENDA G.
Address: 270 NW 120TH STREET
City-St-Zip: N. MIAMI, FL

Title: T () Delete
Name: LOVELL, TERRY M
Address: 150 WEST FLAGLER STREET, SUITE 2200
City-St-Zip: MIAMI, FL 33130

Title: VP () Delete
Name: WILD, ESTELLE
Address: 8525 S.W. 20TH TERR.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: FRUMKES, MELVIN ESQ
Address: 100 N. BISCAYNE BLVD STE 1607
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: CONNOLLY, MICHAEL P
Address: 11300 N.E. 2ND AVENUE
City-St-Zip: MIAMI, FL 33161

Title: P () Delete
Name: MAKAR, STEPHEN J.
Address: 9130 S DADELAND #1400
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: HARRIS, GLENDA G MRS.
Address: 270 NW 120TH STREET
City-St-Zip: N. MIAMI, FL 33168

Title: T (X) Change () Addition
Name: LOVELL, TERRY M ESQ.
Address: 150 WEST FLAGLER STREET, SUITE 2200
City-St-Zip: MIAMI, FL 33130

Title: VP (X) Change () Addition
Name: WILD, ESTELLE MRS.
Address: 8600 S.W. 120TH STREET
City-St-Zip: MIAMI, FL 33156

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

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

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

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

SIGNATURE: STEPHEN J. MAKAR

P

01/29/2004

Electronic Signature of Signing Officer or Director

Date

IRVIN D. MILOWE, D
4675 S.W. 74TH STREET
MIAMI, FL 33143

KRISTIN LINDAHL, D
555 N.E. 34TH STREET, #1502
MIAMI, FL 33137

ANTONIO FINS, D
12620 N.E. 23RD STREET
PEMBROKE PINES, FL 33028

JULIO CARRERA, D
265 E. 5TH STREET
MIAMI, FL 33010

MICHAEL BRAWER, D
9130 S. DADELAND BLVD, SUITE 1400
MIAMI, FL 33156

BRUCE J. IRVING, VP
19134 FISHER ISLAND DRIVE
MIAMI, FL 33109