

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717485

FILED
Apr 20, 2006
Secretary of State

Entity Name: THE FLORIDA ASSOCIATION OF PEDIATRIC SURGEONS, INC.

Current Principal Place of Business:

C/O D A PLUMLEY, M.D.
83 W COLUMBIA ST
ORLANDO, FL 32806 US

Current Mailing Address:

C/O D A PLUMLEY, M.D.
83 W COLUMBIA AT
ORLANDO, FL 32806 US

New Principal Place of Business:

C/O D A PLUMLEY, M.D.
1814 LUCERNE TERRACE, SUITE A
ORLANDO, FL 32806 US

New Mailing Address:

C/O D A PLUMLEY, M.D.
1814 LUCERNE TERRACE, SUITE A
ORLANDO, FL 32806 US

FEI Number: 23-7377063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLUMLEY, DONALD A., M.D.
83 W COLUMBIA ST
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

PLUMLEY, DONALD A., M.D.
1814 LUCERNE TERRACE, SUITE A
ORLANDO, FL 32806 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:

04/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COUGHLIN, JOHN
Address: 1150 N 35TH AVE # 555
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VD () Delete
Name: COUGHLIN, JOHN
Address: 1615 E PRINCETON #320
City-St-Zip: ORLANDO, FL 32007 US

Title: STD () Delete
Name: PLUMLEY, DONALD A
Address: 83 W COLUMBIA ST
City-St-Zip: ORLANDO, FL 32806 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: PLUMLEY, DONALD A
Address: 1814 LUCERNE TERRACE, SUITE A
City-St-Zip: ORLANDO, FL 32806 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DONALD A. PLUMLEY

STD

04/20/2006

Electronic Signature of Signing Officer or Director

Date