

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **743781** (7)

1. Corporation Name

PEDIATRIC AUXILIARY NO. 1, INC.



Principal Place of Business 5208 YELLOW PINE LANE TAMARAC FL 33319	Mailing Address 5208 YELLOW PINE LANE TAMARAC FL 33319
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3. Date Incorporated or Qualified
08/02/1978

4. FEI Number
59-1887357

Applied For
Not Applicable

2. Principal Place of Business 5722 BAYBERRY LANE Suite, Apt. #, etc. TAMARAC FLORIDA City & State Zip 33319 Country BROWARD	2a. Mailing Address 5722 BAYBERRY LANE Suite, Apt. #, etc. TAMARAC FLORIDA City & State Zip 33319 Country BROWARD
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent HUGHES, JEAN 5722 BAYBERRY LANE TAMARAC FL 33319	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PT <input type="checkbox"/> DELETE
NAME	HUGHES, JEAN
STREET ADDRESS	5722 BAYBERRY LANE
CITY-ST-ZIP	TAMARAC FL
TITLE	S <input type="checkbox"/> DELETE
NAME	HOFFMAN, SHIRLEY
STREET ADDRESS	6620 N.E. 21ST TERR.
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	SD <input type="checkbox"/> DELETE
NAME	HUGHES, JEAN
STREET ADDRESS	5722 S. BAYBERRY LANE
CITY-ST-ZIP	TAMARAC FL
TITLE	T <input type="checkbox"/> DELETE
NAME	LUBIN, DORIS
STREET ADDRESS	5905 CEDAR CIRCLE
CITY-ST-ZIP	TAMARAC FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	BARZSO, SHIRLEY
STREET ADDRESS	1306 SE 13 AVENUE
CITY-ST-ZIP	DEERFIELD BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(f), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Jean Hughes Pres. JEAN HUGHES Pres. 1/14/98 954-735-1856**

CR2E037 (10/97)