

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H48165

FILED
Apr 20, 2008
Secretary of State

Entity Name: SARASOTA PEDIATRICS, P.A.

Current Principal Place of Business:

1700 S. OSPREY AVENUE
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

1700 S. OSPREY AVENUE
SARASOTA, FL 34239

New Mailing Address:

1424 CEDAR BAY LANE
SARASOTA, FL 34231

FEI Number: 59-2508200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YONKER, PHYLLIS G.
1700 S. OSPREY AVENUE
SARASOTA, FL 34239 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YONKER, PHYLLIS G.,
Address: 1700 S. OSPREY AVENUE
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: YONKER, PHYLLIS G.,
Address: 1700 S. OSPREY AVENUE
City-St-Zip: SARASOTA, FL

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS G. YONKER

DR.

04/20/2008

Electronic Signature of Signing Officer or Director

Date