

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H79213

1. Entity Name

PALM BEACH PEDIATRICS, P.A.

FILED

Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90007 006 ***150.00

Principal Place of Business

Mailing Address

% DANIEL P. KRAFT
4524 GUN CLUB ROAD
WEST PALM BEACH FL 33415

% DANIEL P. KRAFT
11903 SOUTHERN BLVD., #106
ROYAL PALM BCH. FL 33411-7644
US

2. Principal Place of Business

11903 Southern Blvd

Suite, Apt. #, etc.

106

City & State

ROYAL PALM Beach, FL

Zip

33411

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2724116

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

KRAFT, DANIEL P.
4524 GUN CLUB ROAD
WEST PALM BEACH FL 33406

7. Name and Address of New Registered Agent

Name

Kraft, Daniel P.

Street Address (P.O. Box Number is Not Acceptable)

11903 Southern Blvd.

Suite 106

City

ROYAL PALM Beach

FL

Zip Code

33411

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE MPA
NAME KRAFT, DANIEL P.
STREET ADDRESS 4524 GUN CLUB RD
CITY-ST-ZIP W PALM BCH FL ☐ Delete

TITLE V
NAME BELL, TIMOTHY C
STREET ADDRESS 11903 SOUTHERN BLVD., STE. 106
CITY-ST-ZIP ROYAL PALM BCH. FL ☐ Delete

TITLE V
NAME CROWLEY, JONELL Y
STREET ADDRESS 11903 SOUTHERN BLVD. SUITE 106
CITY-ST-ZIP ROYAL PALM BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11903 Southern Blvd, # 106
CITY-ST-ZIP ROYAL PALM Beach, FL 33411

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daniel P. Kraft
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/00
Date

561-798-2468
Daytime Phone #

CR2E034 (9/99)