

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K58702

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** THE CARDIOLOGY CENTER OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

% LOUIS D. SNYDER  
16244 MILITARY TRAIL, SUITE 560  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

% LOUIS D. SNYDER  
16244 MILITARY TRAIL, SUITE 560  
DELRAY BEACH, FL 33484

**New Mailing Address:**

**FEI Number:** 65-0096096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SNYDER, LOUIS D.  
16244 MILITARY TRAIL  
SUITE 560  
DELRAY BEACH, FL 33484 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:** DPT  
**Name:** SNYDER, LOUIS D MD  
**Address:** 16244 S. MILITARY TRAIL, SUITE 560  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** VPDS  
**Name:** CORONADO, IVAN MD  
**Address:** 19083 TWO RIVER LANE  
**City-St-Zip:** BOCA RATON, FL 33498

**Title:** VPD  
**Name:** SLOAN, SUSAN ARNP  
**Address:** 5622 FOX HOLLOW DRIVE, #C  
**City-St-Zip:** BOCA RATON, FL 33498

**Title:** VPD  
**Name:** COHEN, STEVEN S M.D.  
**Address:** 16244 S. MILITARY TRAIL, SUITE 560  
**City-St-Zip:** DELRAY BEACH, FL 33483

I hereby 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 all other like empowered.

SIGNATURE: LOUIS D. SNYDER, MD

PRES

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date