

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03799

FILED
May 27, 2004
Secretary of State**Entity Name:** SMH SERVICES, INC.**Current Principal Place of Business:**1700 S TAMIAMI TRAIL
SARASOTA, FL 34239**New Principal Place of Business:****Current Mailing Address:**% J. HUGH MIDDLEBROOKS
200 S. ORANGE AVE.
SARASOTA, FL 34236**New Mailing Address:****FEI Number:** 59-2515855**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MIDDLEBROOKS, HUGH J
200 S. ORANGE AVE.
SARASOTA, FL 34236 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:** DST () Delete
Name: BARCOMB, DONNA
Address: 1700 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** D () Delete
Name: KELLY, THOMAS MD
Address: 1880 ARLINGTON ST
City-St-Zip: SARASOTA, FL 34239**Title:** P () Delete
Name: FINLAY, G DUNCAN MD
Address: 1700 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** D () Delete
Name: STRASSER, ROBERT K
Address: 1700 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** DVC () Delete
Name: WILSON, NANCY
Address: 1700 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** DC () Delete
Name: DYAL, RUTH MD
Address: 1700 S TAMIAMI TR
City-St-Zip: SARASOTA, FL 34239**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DC (X) Change () Addition
Name: BARCOMB, DONNA
Address: 1700 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DST (X) Change () Addition
Name: CARTER, GREGORY
Address: 1700 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: MOSS, MARTIN
Address: 1700 S TAMIAMI TR
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the 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 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: G. DUNCAN FINLAY, M.D.

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05/27/2004

Electronic Signature of Signing Officer or Director

Date