2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005 8:00 am
Secretary of State
02-28-2005 90210 022 ****61.25

DOCUMENT # N11693

1. Entity Name
FLORIDA SOCIETY OF NEONATOLOGISTS, INC.

Principal Place of Business	Mailing Address
MARK L. HUDAK, M.D. 653-1 W. 8TH ST. LRC -3RD FLR JACKSONVILLE, FL 32209 US	DEPT. PEDIATRICS/DIV. NEONATOLOGY 653-1 W. 8TH ST. LRC -3RD FLR JACKSONVILLE, FL 32209 US

DO NOT WRITE IN THIS SPACE

000133/3

01122005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2653813
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired — ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LONG, FAYE
653-1 W. 8TH ST. LRC -3RD FLR
JACKSONVILLE, FL 32209

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUDAK, MARK L M.D.
STREET ADDRESS	653-1 WEST 8TH STREET, LRC-3
CITY-ST-ZIP	JACKSONVILLE, FL 32209
TITLE	DPE
NAME	MCMAHAN, MICHAEL M.D.
STREET ADDRESS	92 WEST MILLER STREET
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	STD
NAME	MCMAHAN, MICHAEL MD
STREET ADDRESS	92 WEST MILLER ST
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	ED
NAME	LONG, FAYE
STREET ADDRESS	653-1 W 8TH STREET LRC-3
CITY-ST-ZIP	JACKSONVILLE, FL 32209
TITLE	STD
NAME	VALDES, ERNESTO M.D.
STREET ADDRESS	7804 SW TERR.
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark L. Hudak, M.D. 2/15/05 904-244-3508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Division of Corporations #N11693 50019379

2005 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

	This information cannot be changed on the report.
Document Number	N11693
Business Entity Name	FLORIDA SOCIETY OF NEONATOLOGISTS, INC.
Original File Date	10/21/1985

FEI Number 59-2653813

Principal Address
MARK L. HUDAK, M.D.
653-1 W. 8TH ST. LRC -3RD FLR
JACKSONVILLE, FL 32209 US

Mailing Address
DEPT. PEDIATRICS/DIV. NEONATOLOGY
653-1 W. 8TH ST. LRC -3RD FLR
JACKSONVILLE, FL 32209 US

Registered Agent
FAYE LONG
653-1 W. 8TH ST. LRC -3RD FLR
JACKSONVILLE, FL 32209 US

Officer/Director Name And Address

PD
M.D. MARK L HUDAK
653-1 WEST 8TH STREET, LRC-3
JACKSONVILLE, FL 32209

DPE
M.D. MICHAEL MCMAHAN
92 WEST MILLER STREET
ORLANDO, FL 32806

STD
MD MICHAEL MCMAHAN
92 WEST MILLER ST
ORLANDO, FL 32806

ED
FAYE LONG
653-1 W 8TH STREET LRC-3
JACKSONVILLE, FL 32209

ATTACHMENT
#N11693

STD
M.D. ERNESTO VALDES
7804 SW TERR.
MIAMI, FL 33143

5001937 9

If all of the above information is correct and you do not wish to make any changes, please select:

No Changes

If you need to make changes to the above information, please select:

Make Changes

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