2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19391

FILED Mar 15, 2005 Secretary of State

Entity Name: FLORIDA OBSTETRIC AND GYNECOLOGIC SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

8833 PERIMETER PARK BLVD SUITE 301

JACKSONVILLE, FL 32216

New Mailing Address: Current Mailing Address:

8833 PERIMETER PARK BLVD. PO BOX 19738 JACKSONVILLE, FL 322459738 US STE. 301

JACKSONVILLE, FL 32216

FEI Number: 59-2986220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SEYMOUR, CHRISTOPHER ED 8833 PERIMETER PARK BLVD SUITE 301 JACKSONVILLE, FL 32216 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MCWILLIAMS, SPURGEON W MD BURIGO, JOHN MD Name: Name: 1620 RIGGINS ROAD Address: 1515 N. FLAGLER DR., STE. 700 Address:

City-St-Zip: TALLAHASSEE, FL 323085316 City-St-Zip: WEST PALM BEACH, FL 334013431

Title: () Delete Title: (X) Change () Addition YELVERTON, ROBERT W MD Name: ORR, JR., JAMES W MD Name: Address: 2818 W. VIRGINIA AVENUE Address: 2780 CLEVELAND AVE., STE, 717

City-St-Zip: TAMPA, FL 336076330 City-St-Zip: FT. MYERS, FL 339015857 Title: VD. () Delete Title: (X) Change () Addition

BENRUBI, GUY I MD BENRUBI, GUY I MD Name: Name: 653-1 WEST 8TH STREET #1 653-1 WEST 8TH STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 322096511 City-St-Zip: JACKSONVILLE, FL 322096511

Title: TD () Delete Title: (X) Change () Addition Name: BONE, MELANIE MD Name: MCCARUS, TAMBERLY MD 10094 W. INDIANTOWN RD. Address: Address: 1442 KELSO BLVD.

City-St-Zip: JUPITER, FL 33478 City-St-Zip: WINDERMERE, FL 34786 Title: () Delete Title: (X) Change () Addition

MORALES, BERT MD MORALES, ROBERT MD Name: Name: 2001 MICCOSUKEE RD. 2001 MICCOSUKEE RD. Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

Title: () Delete Title: (X) Change () Addition SEYMOUR, CHRISTOPHER ED SEYMOUR, CHRISTOPHER ED Name: Name: Address: 8833 PEERIMETER PARK BLVD. #301 Address: 8833 PERIMETER PARK BLVD. #301

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216 City-St-Zip: City-St-Zip:

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: CHRISTOPHER SEYMOUR ED 03/15/2005