2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State
05-24-2000 90082 024 ****61.25

DOCUMENT # N44356

1. Entity Name

PALM BEACH PEDIATRIC SOCIETY, INC.

Principal Place of Business	Mailing Address
4524 GUN CLUB ROAD WEST PALM BEACH FL 33415	932 DOLPHIN DR. JUPITER FL 33458-4302 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0291746 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GRAHAM, SUSANNE O. 932 DOLPHHIN DR. JUPITER FL 33458	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing *Trust Fund Contribution.* ☐ **$5.00** May Be *Added to Fees*	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, JANIS MD 927 45TH ST. SUITE 205 WEST PALM BEACH FL 33407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEATTIE, JIM 2311 N. FLAGLER DR. WEST PALM BCH. FL 33407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jim Beattie, MD ~~6205 Village Blvd~~ West Palm Beach Fl 33407	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAHAM, SUSIE 932 DOLPHIN DRIVE JUPITER FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAN JORGE, MARIA M 10625 NORTH MILITARY TRAIL, #202 PALM BEACH GARDENS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Maria San Jorge MD 2560 RCA Blvd, #113 Palm Beach Gardens Fl 33410	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FASKE, IVY 3365 BURNS RD #100 PALM BEACH GARDENS FL 33410	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ada Camejo Hanlon, MD 5205 Village Blvd West Palm Beach Fl 33407	☐ Change ☒ Addition

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: Susie Graham REQUIRED Susie Graham 5/1/00 561-575-4309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #