2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N44356

1. Entity Name

PALM BEACH PEDIATRIC SOCIETY, INC.



FILED Mar 03, 2008 08:00 A **Secretary of State**

Principal Place of Business

Mailing Address

10111 W. FOREST HILL BLVD., SUITE 150 WEST PALM BEACH, FL 33414

932 DOLPHIN DR.

JUPITER, FL 33458 US



DO NOT WRITE IN THIS SPACE

02272008 No Chg-NP

CR2E037 (4/06)

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

GRAHAM, SUSANNE O. 932 DOLPHHIN DR. JUPITER, FL 33458

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent				required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, JANIS MD 927 45TH ST. SUITE 205 WEST PALM BEACH, FL. 33407				U00000846784
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAHAM, SUSANNE O 932 DOLPHIN DRIVE JUPITER, FL 33458				03/18/08-80042-010 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAN JORGE, MARIA MD 2560 RCA BLVD, #113 PALM BEACH GARDENS, FL 33410			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FASKE, IVY 3365 BURNS RD #100 PALM BEACH GARDENS, FL 33410			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANLON, ADA C 5205 VILLAGE BLVD WEST PALM BEACH, FL 33407				
TITLE	ח				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 eath; 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:

BRUCK, MICHAEL

10111 W. FOREST HILL BLVD., SUITE 150

WEST PALM BEACH, FL 33414

NAME

STREET ADDRESS

5001