

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90200 039 ****61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000002352

1. Corporation Name

EPILEPSY SERVICES OF BROWARD, INC.

Principal Place of Business

512 NE THIRD AVE
FT. LAUDERDALE FL 33301
US

Mailing Address

512 NE THIRD AVE
FT. LAUDERDALE FL 33301
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

05/21/1993

4. FEI Number

65-0414041

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

JOHNSON, JACQUELINE M
512 N E THIRD AVE
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

PATRICIA A. CLARK

82 Street Address (P.O. Box Number is Not Acceptable)

512 N E THIRD AVE

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33301

11. Pursuant to the provisions of Sections 617.002 and 617.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Patricia A. Clark
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KROHN, MEL D
STREET ADDRESS 7500 N W 5TH ST
CITY-ST-ZIP PLANTATION FL ☒ DELETE

TITLE TD
NAME MCGRATH, ROBERT E.
STREET ADDRESS 2400 E COMMERCIAL BLVD
CITY-ST-ZIP CORAL SPRINGS FL 33308 ☒ DELETE

TITLE VD
NAME DANIELS, ANDREW E.
STREET ADDRESS 7285 N W 63 TERRACE
CITY-ST-ZIP PARKLAND FL 33067 ☒ DELETE

TITLE SD
NAME TOMCYKOSKI, ESTHER
STREET ADDRESS 1350 SEAGRAPE CIR
CITY-ST-ZIP FT LAUDERDALE FL 33326 ☒ DELETE

TITLE AED
NAME CLARK, PATRICIA A
STREET ADDRESS 512 N E THIRD AVE
CITY-ST-ZIP FT LAUDERDALE FL 33301 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME CASTIGLIA, A. (BUSTER)
1.3 STREET ADDRESS 1801 S.W. 1st STREET
1.4 CITY-ST-ZIP MIAMI, FL 33135

2.1 TITLE TD ☒ Change ☐ Addition
2.2 NAME SMITH, RICHARD M.
2.3 STREET ADDRESS 4788 N.W. 98 LANE
2.4 CITY-ST-ZIP CORAL SPRINGS, FL 33076

3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME BUCHSBAUM, KAREN A.
3.3 STREET ADDRESS 2701 PONCE de LEON BLVD. #300
3.4 CITY-ST-ZIP CORAL GABLES, FL 33134

4.1 TITLE SD ☒ Change ☐ Addition
4.2 NAME NEW, ROBERT
4.3 STREET ADDRESS 11414 N. BAYSHORE DRIVE
4.4 CITY-ST-ZIP N. MIAMI, FL 33181

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME CLARK, PATRICIA A
5.3 STREET ADDRESS 512 N.E. THIRD AVE
5.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patricia A. Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/20/99

954.779-1509

CDEN27 (11/98)