

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2007 8:00 am
Secretary of State

08-16-2007 90013 028 ****61.25

DOCUMENT # N94000002966
 1. Entity Name
 MANATEE PHYSICIAN-HOSPITAL ORGANIZATION, INC.



Principal Place of Business
 206 SECOND ST E
 BRADENTON, FL 34208

Mailing Address
 206 SECOND ST E
 BRADENTON, FL 34208

40123000



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

07122007 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
 65-0538535

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GRANT, TAMARA
 206 SECOND STREET EAST
 BRADENTON, FL 34208

7. Name and Address of New Registered Agent
 Name Lerow, Michele
 Street Address (P.O. Box Number is Not Acceptable)
206 Second Street East
 City Bradenton FL Zip Code 34208

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 Michele P. Lerow DATE 8/1/07

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

Filing Fee is \$61.25
Due by September 14, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ORR, ROY 206 SECOND ST E BRADENTON, FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD FLYNN, BRIAN 206 2ND STREET E. BRADENTON, FL 34208	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD CHRISTINE, GERALD 206 SECOND ST E BRADENTON, FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD Chisholm, Moody 206 Second Street East Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 my address, with all other like empowered.

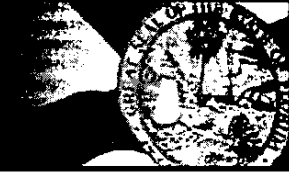
SIGNATURE: [Signature] DAYTIME PHONE # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

40129273 ATTACHMENT

7/12/07

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



- Home
- Contact Us
- E-Filing Services
- Document Searches
- Forms
- Help

2007 Annual Report

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

**** This information cannot be changed on the report. ****

Document Number N94000002966

Business Entity Name MANATEE PHYSICIAN-HOSPITAL ORGANIZATION, INC.

Original File Date 06/13/1994

FEI Number 65-0538535

Principal Address 206 SECOND ST E
BRADENTON, FL 34208

Mailing Address 206 SECOND ST E
BRADENTON, FL 34208

Registered Agent ~~TAMARA GRANT~~ *Michele Lerow*
206 SECOND STREET EAST
BRADENTON, FL 34208 US

Officer/Director Name And Address

SD
ROY ORR
206 SECOND ST E
BRADENTON, FL 34208

CD
~~BRIAN FLYNN~~ *Moody Chisholm*
206 2ND STREET E.
BRADENTON, FL 34208

TD
GERALD CHRISTINE
206 SECOND ST E
BRADENTON, FL 34208

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

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