2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006574

FILED Jul 12, 2010 Secretary of State

Entity Name: FLORIDA CHILDREN'S PHYSICIANS AND SURGEONS, INC.

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

615 EAST PRINCETON STREET 1220 SLEIGH BLVD SUITE 400 ORLANDO, FL 32806

ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

PO BOX 533074

ORLANDO, FL 32803 US

FEI Number: 59-3480126 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:

SIGNER, RICHARD D CHAET, MARK S 1255 VIA LUGANO 98 SPRING LANE

WINTER PARK, FL 32789 US WINTER PARK, FL 32789 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: MARK S CHAET 07/12/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

 Name:
 CHAET, MARK

 Address:
 1220 SLEIGH BLVD

 City-St-Zip:
 ORLANDO, FL 32806

Title: D

Name: DESAI, VIVEK
Address: 844 N. THORNTON AVE.
City-St-Zip: ORLANDO, FL 32803

Title:

Name: SELSKY, CLIFFORD

Address: 2501 N ORANGE AVE SUITE 589

City-St-Zip: ORLANDO, FL 32803

Title: D

Name: GOLDBERG, NEIL

Address: 2718 N. ORANGE AVE SUITE B

City-St-Zip: ORLANDO, FL 32804

Title:

Name: GARCIA, JORGE

Address: 2501 N. ORANGE AVE SUITE 310

City-St-Zip: ORLANDO, FL 32804

I hereby 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 all other like empowered.

SIGNATURE: MARK S. CHAET D 07/12/2010