## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with

SIGNATURE:

## Jan 21, 2005 08:00 AM **Secretary of State** DOCUMENT # P03000042272 1. Entity Name TREASURE COAST PEDIATRICS, P.A. Mailing Address Principal Place of Business 777 37 ST 106-C 777 37 ST 106-C VERO BEACH, FL 32960 VERO BEACH, FL 32960 01182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3772283 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THORNTON, DANIEL L M.D. DO NOT WRITE 777 37 ST 106-C VERO BEACH, FL 32960 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 little if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE HEIGHTH HANDER THORNTON, DANIEL L M.D. NAME 01/24/0S-90039-021 150.00 STREET ADDRESS 777 37 ST 106-C VERO BEACH, FL 32960 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

**FILED**