

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000124529

FILED
Jan 06, 2011
Secretary of State

Entity Name: PEDIATRIC HOSPITAL SERVICES OF SOUTHWEST FLORIDA, P.A.

Current Principal Place of Business:

157 DOCKSIDE CIRCLE
WESTON, FL 33327

New Principal Place of Business:

1117 EAST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

Current Mailing Address:

157 DOCKSIDE CIRCLE
WESTON, FL 33327

New Mailing Address:

1117 EAST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

FEI Number: 20-5632488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREISSMAN, ALLAN
157 DOCKSIDE CIRCLE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GREISSMAN, ALLAN
Address: 157 DOCKSIDE CIR
City-St-Zip: WESTON, FL 33327

Title: S
Name: LAVANDOSKY, GERALD
Address: 3501 JOHNSON ST
City-St-Zip: HOLLYWOOD, FL 33021

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLAN GREISSMAN

PRES

01/06/2011

Electronic Signature of Signing Officer or Director

Date