## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 07, 2005 8:00 am Secretary of State

DOCUMENT # P94000083129  1. Entity Name SUNLIFE PEDIATRIC NETWORK, INC.									03-07-200:	5 90287 031	***150.	.00	
Principal Place of Business 1000 PARK FORTY PLAZA DURHAM, NC 27713 US			Mailing Address 1000 PARK FORTY PLAZA DURHAM, NC 27713 US						• (8)(1 8)7(1 88)(1 89)		2347	<u> </u>	
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01252005	Chg-P	CR2E0	34 (10/03)		
City & State			City & State					4. FEI Numb 65-053	=-			oplied For ot Applicable	
Zip				Zip Count			5. Certificate of Status Desired S8.75 Additional Fee Required						
<del></del>	red Agent				7. Name and	Address of Ne	w Registered A	.gent					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324						Name Street Address (P.O. Box Number is Not Acceptable)							
										FL	Zip Code	e	
The above named entity submits this statement for the purpose of changing its register.						ed office o	register	ed agent, or bo	th, in the State o		,		
the obligat	the obligations of registered agent.												
SIGNATURE	Signature, typed	or printed name of registered agent	and little if a	pplicable. (NOT	E: Registere	d Agent signat	ure required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution.						ncing	<b>\$5.</b> Add	\$5.00 May Be Added to Fees  MAKE CHECK PAYABLE TO FLORIDA DEPARTMENT OF STATE					
10.		OFFICERS AND	DIRECT	290	11.			ADDITIONS	  CHANGES TO (	DEELCEDS AND	DIRECTOR	S INI 1 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2828 CR	CK, STEPHEN J MD DASDAILE DRIVE I, NC 27705	DIRECT	☐ Delete	TITU NAM STRE				EN J MD PLAZA SUIT		Change	Addilion	
TITLE NAME	vs	RT, EUGENE F JR		☐ Delete	TITLE		V.S	ERT, EUGE			⊠ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	2828 CROASDAILE DRIVE DURHAM, NC 27705								PLAZA SUITI	£ 500			
TITLE NAME STREET ADORESS CITY-ST-ZIP	2828 CR	ON, JOANN W DASDAILE DRIVE I, NC 27705		<b>⊠</b> Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2828 CR	EILEEN E DASDALE DRIVE , NC 27705		☐ Delete			1000 f	, EILEEN E. PARK FORTY FAM, NC	PLAZA SUIT 19913	e 50c	⊠ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	AMMY DASDAILE DR I, NC 27705		⊠ Delete							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition	
12. 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 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 changed, or on an attachment with an address, with all other like empowered.												or director	

Eugene F. Nauchert Fr