2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State
02-05-2001 90070 016 ***158.75

DOCUMENT # P96000075933

1. Entity Name
ANCHOR HEALTH CENTERS, P.A.

Principal Place of Business	Mailing Address
2400 9TH ST. NORTH STE 400 NAPLES FL 34103 US	2400 9TH ST. NORTH STE 400 NAPLES FL 34103 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3417916 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
B&C CORPORATE SERVICES OF CENTRAL FLA.,INC 390 N. ORANGE AVE., SUITE 1100 ORLANDO FL 32801	Name: Thomas P. Clark Street Address (P.O. Box Number is Not Acceptable): Henderson Franklin [redacted] 1715 Monroe Street City: Fort Myers FL Zip Code: [redacted]

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. 339.01

SIGNATURE: Thomas P. Clark 1/23/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JONES, PAUL O MD 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	VP of Cardiology BOUCEK, FRANCIS C. MD 2400 9TH ST N STE 400 NAPLES FL 34103	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COURINGTON, KENNETH MD 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	Director of Cardiac Imaging BUONAVOLONTA, JAMES J MD 2400 9TH ST N STE 400 NAPLES FL 34103	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DUDLEY ~~DUDLEY~~, DULCE V M.D. 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	Director of CP Rehab Albert, Lawrence H., MD 2400 9th St N, Suite 400 NAPLES FL 34103	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PARSONS, GARY A MD 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	VP of Strategic Planning DIAZ, JOHN R., MD 2400 9TH ST N, Suite 400 NAPLES FL 34103	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LINDNER ~~LINDNER~~, DAVID MD 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	VP of Quality Assurance HANSON, ROBERT E, MD 2400 9TH ST N, SUITE 400 NAPLES FL 34103	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GALLOPS, MICHAEL MD 2400 9TH ST. NORTH STE 400 NAPLES FL 34103	☐ Delete	ASST. VP KOROLEVICH, ROBERT, MD 2400 TAMIAMI TRL, SUITE 400 NAPLES FL 34103	☐ Change	☑ Addition

CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] PAUL O. JONES JR, MD 1/12/01 941-262-5228
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — PRESIDENT — Date — Daytime Phone #

Attachment Sheet

1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Document #P96000079
D00136 85

ADDITIONS

OFFICER OR DIRECTOR NAME	TITLE
Dr. Scott L. Wiesen 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Gastroenterology VP
Dr. Jacob H. Jordan 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Surgery VP
Dr. George W. Ferguson 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Facilities VP
Dr. Phillip M. Francis, Jr. 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Management Info Systems VP
Dr. Hermes O. Koop 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Finance VP
Dr. Debra Shepard 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Pediatrics VP
Dr. Howard J. Kapp 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Orthopedic Surgery VP
Dr. E. Sean Kelley 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Pain Management VP
Dr. Mark A. Brown 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Infectious Disease VP
Dr. Brian J. Kiedrowski 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Geriatrics VP
Dr. Angel H. Herrera 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Walk In Clinic VP
Dr. J. P. van Dongen 2400 9th Street, North, Suite 400 Naples, Florida 34103	Vice President of Wellness Services VP