

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

03-07-2005 90287 024 ***150.00

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1. Entity Name
FT. LAUDERDALE PERINATAL ASSOCIATES, P.A.



Principal Place of Business
1000 PARK FORTY PLAZA
DURHAM, NC 27713

Mailing Address
1000 PARK FORTY PLAZA
DURHAM, NC 27713

50023477



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01252005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
56-2067390

Applied For
Not Applicable

Zip

Country

Zip

Country

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title 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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

MAKE CHECK PAYABLE TO
FLORIDA DEPARTMENT OF STATE

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME DRESNICK, STEPHEN J MD
STREET ADDRESS 2828 CROASDAILE DR.
CITY - ST - ZIP DURHAM, NC 27705

TITLE PDS ☒ Change ☐ Addition
NAME DRESNICK, STEPHEN J M.D.
STREET ADDRESS 1000 PARK FORTY PLAZA SUITE 500
CITY - ST - ZIP DURHAM, NC 27713

TITLE VS ☒ Delete
NAME DAUCHERT, EUGENE F JR.
STREET ADDRESS 2828 CROASDAILE DR.
CITY - ST - ZIP DURHAM, NC 27705

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE V ☒ Delete
NAME DAVIS, TAMMY
STREET ADDRESS 2828 CROASDAILE DR.
CITY - ST - ZIP DURHAM, NC 27705

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE T ☒ Delete
NAME SPOON, EILEEN E
STREET ADDRESS 2828 CROASDAILE DR.
CITY - ST - ZIP DURHAM, NC 27705

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Stephen J. Dresnick

2-17-05

786-437-1600