

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90266 003 \*\*\*150.00

**DOCUMENT # P99000054053**

1. Entity Name

ECS OF KENTUCKY, INC.



Principal Place of Business

500 WEST CYPRESS CREEK ROAD  
SUITE 450  
FT. LAUDERDALE FL 33309

Mailing Address

C/O LEGAL DEPT  
2828 CROASDAILE DRIVE  
DURHAM NC 27705

2. Principal Place of Business

2828 CROASDAILE DRIVE

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

DURHAM NC

City & State

Zip

27705

Country

USA

Zip

Country

4. FEI Number

65-0925773

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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, 2004, Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DCEO ☒ Delete  
NAME SCOTT, M.D., STEVEN M  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-ST-ZIP DURHAM NC 27705

TITLE PCFO ☒ Delete  
NAME GREENMAN, JACK S  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-ST-ZIP DURHAM NC 27705

TITLE ST ☒ Delete  
NAME WEGNER, ANITA S  
STREET ADDRESS 2828 CROASDAILE DR.  
CITY-ST-ZIP DURHAM NC 27705

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☐ Change ☒ Addition  
NAME STEPHEN J. DRESNICK, M.D.  
STREET ADDRESS 2828 CROASDAILE DRIVE  
CITY-ST-ZIP DURHAM, NC 27705

TITLE V/S ☐ Change ☒ Addition  
NAME EUGENE F. DAUCHERT JR  
STREET ADDRESS 2828 CROASDAILE DRIVE  
CITY-ST-ZIP DURHAM, NC 27705

TITLE V ☐ Change ☒ Addition  
NAME TAMMY DAVIS  
STREET ADDRESS 2828 CROASDAILE DRIVE  
CITY-ST-ZIP DURHAM, NC 27705

TITLE T ☐ Change ☒ Addition  
NAME EILEEN E. SPOON  
STREET ADDRESS 2828 CROASDAILE DRIVE  
CITY-ST-ZIP DURHAM, NC 27705

TITLE ☐ Change ☐ Addition  
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: Eugene F. Dauchert, Jr EUGENE F. DAUCHERT, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/8/04 919-383-0355

Daytime Phone #