

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90009 004 ***558.75

DOCUMENT # P99000061242

1. Entity Name

Central Florida OB/GYN Specialists, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5 Island Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Lake Mary, Florida

City & State

4. FEI Number
59-3588149

Applied For

Not Applicable

Zip
32746

Country
USA

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Dennis J. Buhring

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

455 West Warren Avenue

City Longwood

FL

Zip Code
32750

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/26/02

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Samuel L. McLeod, III, MD
2931 Cullen Lake Shore
Orlando, FL 32812

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

John Farnella, Jr., MD
8401 Vintage Drive
Orlando, FL 32835

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Peter Perry, MD
4865 Red Brick Run
Sanford, FL 32771

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Penny Danna, MD
1222 Heron Drive
Orlando, FL 32803

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Mark Bielawny, MD
214 N. Brown Avenue
Orlando, FL 32801

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Jack Gerkovich, MD
1309 Waterwitch Cove Circle
Orlando, FL 32806

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis J. Buhring

8/26/02

Date

407-262-5715

Daytime Phone #

CR2E034B (12/01)

Attachment
D# P99000061242

871297

#11 OFFICERS AND DIRECTORS

Title: Name: Street Address: City-St-Zip:	S Dennis Buhning 5 Island Drive Lake Mary, FL 32746	Title: Name: Street Address: City-St-Zip:	D Robert Bowles, M.D. 495 Fawn Hill Place Lake Forest, FL 32771
Title: Name: Street Address: City-St-Zip:	D Terrence Peppy, M.D. 12867 Butler Bay Ct Windermere, FL 34786	Title: Name: Street Address: City-St-Zip:	D Virgil Davila, M.D. 585 Dunmar Circle Winter Springs, FL 32708
Title: Name: Street Address: City-St-Zip:	D Gregory Zittel, M.D. 232 New Gate Loop Heathrow, FL 32746	Title: Name: Street Address: City-St-Zip:	D Leroy Raphael 1617 Billingshurst Orlando, FL 32825
Title: Name: Street Address: City-St-Zip:	D Marc Bischof, M.D. 3330 Florene Dr Orlando, FL 32806	Title: Name: Street Address: City-St-Zip:	D Alejandro Peña, M.D. 3177 Butler Bay Dr N Windermere, FL 34786
Title: Name: Street Address: City-St-Zip:	D Barbara Harris, M.D. 1600 S SR 415 New Smyrna Beach, FL 32168	Title: Name: Street Address: City-St-Zip:	