

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085597

1. Entity Name

CENTRAL FLORIDA PEDIATRIC CARE, P.A.



FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90009 001 ***150.00

Principal Place of Business

2875 SOUTH ORANGE AVE., STE 540
ORLANDO FL 32806

Mailing Address

2875 SOUTH ORANGE AVE., STE 540
ORLANDO FL 32806

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

52-2195880

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

KALTER, ZANE MD
2875 SOUTH ORANGE AVE., STE 540
ORLANDO FL 32806

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.

SIGNATURE

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	D KALTER, ZANE MD 2875 SOUTH AVE STE 540 ORLANDO FL 32806	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D QUINONEZ, MARIE MD 2875 SOUTH ORANGE AVE., STE 540 ORLANDO FL 32806	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GEISMAR, SHARI DO 12301 LAKE UNDERHILL RD STE D ORLANDO FL 32822	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TAYLOR, ADILA F MD 1000 WEST BROADWAY STREET STE 102 MIAMI FL 32765	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BELTON, JANET MD 2271 EAST SEMORAN BLVD APOPKA FL 32703	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 7/31/00

Date

Daytime Phone #

014/15/00

CENTRAL FLORIDA
Pediatric Care, P.A.

Janet Bellon, MD
Shari Geismar, DO
Zane Kalter, MD
Marie Quiñonez, MD



Attachment Doc#
P99000085597
AB071450

July 27, 2000

State of Florida
Katherine Harris
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

RE: Central Florida Pediatric Care, P.A.
Document Number: P99000085597

Dear Secretary,

Please accept this filing as being timely. This is a new corporation, which was incorporated on September 24, 1999. I have not seen a prior form and don't think we received the first business report.

Per my conversation with Robert in your office on July 27, 2000, He suggested that I write this letter and the proposed penalty would be abated.

I am sorry this filing is delayed, and have already marked my 2001 calendar so that this doesn't happen again.

Sincerely,

Diana N. Kalter

Diana N. Kalter

DNK/mdn