2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2014
Secretary of State
CC4265452082

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Entity Name: PALM BEACH PEDIATRIC SOCIETY, INC.

Current Principal Place of Business:

12955 PALMS WEST DRIVE,
ATTENTION SHANNON FOX, M.D PEDIATRIC SOCIETY BUILDING 8 SUITE 100
LOXAHATCHEE, FL 33470

Current Mailing Address:

932 DOLPHIN DR.
JUPITER, FL 33458 US

FEI Number: 65-0291746

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRAHAM, SUSANNE O
932 DOLPHHIN DR.
JUPITER, FL 33458 US

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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	JONES, JANIS MD
Address	5205 GREENWOOD AVE, SUITE 251
City-State-Zip:	WEST PALM BEACH FL 33407

Title	D
Name	GRAHAM, SUSANNE O
Address	932 DOLPHIN DRIVE
City-State-Zip:	JUPITER FL 33458

Title	D
Name	FASKE, IVY MD
Address	12300 ALT. A1A, SUITE 109
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D
Name	FOX, SHANNON MD
Address	12955 PALMS WEST DRIVE, BUILDING 8, SUITE 100
City-State-Zip:	LOXAHATCHEE FL 33470

Title	D
Name	BRUCK, MICHAEL
Address	10115 W FOREST HILL BLVD STE 402
City-State-Zip:	WEST PALM BEACH FL 33414

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSANNE O GRAHAM — VOLUNTEER ADMINISTRATOR — 01/14/2014

Electronic Signature of Signing Officer/Director Detail — Date