

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45114

Entity Name: SOUTHEASTERN ASSOCIATION OF NEONATOLOGISTS, INC.**FILED**
Feb 26, 2025
Secretary of State
0761837237CC**Current Principal Place of Business:**C/O BARRY D. CHANDLER, MD
10080 150TH COURT NORTH
JUPITER, FL 33478**Current Mailing Address:**C/O BARRY D. CHANDLER, MD
10080 150TH COURT NORTH
JUPITER, FL 33478 US**FEI Number:** 65-0283926**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHANDLER, BARRY D MD
C/O BARRY D. CHANDLER, MD
10080 150TH COURT NORTH
JUPITER, FL 33478 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 PRESIDENT
Name ADAMKIN, DAVID H
Address UNIVERSITY OF LOUISVILLE
City-State-Zip: LOUISVILLE KY 40207

Title DIRECTOR
Name ST. GERMAIN, AARON
Address 601 5TH ST.
 SUITE 5
City-State-Zip: ST. PETERSBURG FL 33701

Title EXECUTIVE DIRECTOR
Name CHANDLER, BARRY
Address 10080 150TH COURT NORTH
City-State-Zip: JUPITER FL 33478

Title DIRECTOR
Name MORRIS, LEE
Address 2324 PANSY ST.
City-State-Zip: HUNTSVILLE AL 35801

Title DIRECTOR
Name BOYD, ROLAND
Address 1730 14TH ST.
 SUITE C
City-State-Zip: MERIDIAN MS 39301

Title DIRECTOR
Name FERRY, JENELLE DR.
Address 4816 W BEACHWAY DRIVE
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name WHITNEY, DONNA DR.
Address 1502 TOWSON DRIVE
City-State-Zip: COLUMBIA TN 38401

Title DIRECTOR
Name HUFF, LORI
Address 10 MCCLENNAN BANKS DRIVE
City-State-Zip: CHARLESTON SC 29425

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: BARRY D CHANDLER MD**EXECUTIVE DIRECTOR****02/26/2025**

Electronic Signature of Signing Officer/Director Detail

Date