

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V71221

**Entity Name:** SOUTHEAST PERINATAL ASSOCIATES, INC.

**Current Principal Place of Business:**

7700 W. SUNRISE BLVD  
PLANTATION, FL 33322

**Current Mailing Address:**

7700 WEST SUNRISE BOULEVARD  
MAILSTOP PL-6  
PLANTATION, FL 33322 US

**FEI Number:** 65-0363303

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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, DIRECTOR  
Name            SMITH, M.D., DOUGLAS  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

Title            SENIOR VP - CLINICAL  
Name            CHAUNG, M.D., CHAN-CHOU  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

Title            TREASURER  
Name            CHARPENTIER, JASON  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

Title            SECRETARY, SENIOR VICE  
                  PRESIDENT  
Name            MOORE, ILENE  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

Title            VP, ASST. SECRETARY  
Name            PAGE, JUSTIN  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

Title            VP  
Name            MUSSO, MATTHEW  
Address        7700 W. SUNRISE BLVD  
City-State-Zip: PLANTATION FL 33322

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUSTIN PAGE

**VICE PRESIDENT**

**04/28/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date