

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 700803 (0)

1. Corporation Name

VOLUSIA COUNTY MEDICAL SOCIETY INC



Principal Place of Business

Mailing Address

**303 N. CLYDE MORRIS BLVD.
P. O. BOX 9595
DAYTONA BEACH, FLORIDA 32120**

**303 N. CLYDE MORRIS BLVD.
P. O. BOX 9595
DAYTONA BEACH, FLORIDA 32120
US**

3. Date Incorporated or Qualified
04/14/1960

3a. Date of Last Report
01/18/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

23-7027951

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LOUCKS, WILLIAM E
444 SEABREEZE BLVD
SUITE 900
DAYTONA BEACH FL 32118**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD** ☐ DELETE
NAME **BELL, MICHAEL**
STREET ADDRESS **809 NORTH STON ST**
CITY-ST-ZIP **DELAND FL**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **TESSLER, RICHARD H.**
1.3 STREET ADDRESS **311 N. CLYDE MORRIS BLVD.**
1.4 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **PD** ☐ DELETE
NAME **BROWN, KIMBERLEE T**
STREET ADDRESS **1900 MASON AVE**
CITY-ST-ZIP **DAYTONA BEACH FL**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **MILES, STEVEN G.**
2.3 STREET ADDRESS **1415 DUNN AVE.**
2.4 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **VD** ☐ DELETE
NAME **TESSLER, RICHARD H**
STREET ADDRESS **504 PALMETTO STREET**
CITY-ST-ZIP **NEW SMYRNA BEACH FL**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **BELL, MICHAEL**
3.3 STREET ADDRESS **809 N. STONE STREET**
3.4 CITY-ST-ZIP **DELAND, FL 32720**

TITLE **TD** ☐ DELETE
NAME **MILES, STEVEN G**
STREET ADDRESS **1415 DUNN AVE**
CITY-ST-ZIP **DAYTONA BCH FL**

4.1 TITLE **TD** ☐ Change ☒ Addition
4.2 NAME **CALDWELL, JACQUES**
4.3 STREET ADDRESS **311 N. CLYDE MORRIS BLVD, SUITE 510**
4.4 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/96

(904) 255-3321

Date

Daytime Phone #

CR2E037 (12/95)