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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 14 AM 7:54

DOCUMENT # F26161 (2)

1. Corporation Name
MEDICAL SPECIALTY GROUP, P.A.

Principal Place of Business	Mailing Address
~~6405 N FEDERAL HWY #300~~ ~~MEDICAL OFFICE COMPLEX~~ ~~FT LAUDERDALE FL 33308~~	~~6405 N FEDERAL HWY #300~~ ~~MEDICAL OFFICE COMPLEX~~ ~~FT LAUDERDALE FL 33308~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/01/1981
3a. Date of Last Report: 03/08/1994

2. Principal Place of Business	2a. Mailing Address
21 1900 E Commercial Blvd	26 1900 E. Commercial Blvd
Suite, Apt. #, etc 22 101	Suite, Apt. #, etc 27 101
City & State 23 FORT LAUDERDALE, FL	City & State 28 FORT LAUDERDALE FL
Zip / Country 24 33308 25	Zip / Country 29 33308 30

4. FEI Number: 59-2075135 ☐ 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
MEIGS, ROBERT S 6405 N FEDERAL HWY #300 MEDICAL OFFICE COMPLEX FORT LAUDERDALE FL 33308	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 1900 E COMMERCIAL BLVD 83 SUITE 101 84 City: FORT LAUDERDALE FL 85 Zip Code: 33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, 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 607.0505, Florida Statutes.

SIGNATURE _____ (If changing registered agent, registered agent must sign here.) (If Registered Agent signature required above) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition
NAME	MEIGS, ROBERT S.	12 NAME	
STREET ADDRESS	6405 N FEDERAL HWY #300	13 STREET ADDRESS	1900 E. Commercial BLVD
CITY-ST-ZIP	FT. LAUDERDALE FL	14 CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	VD	21 TITLE	☒ Change ☐ Addition
NAME	LUCERI, RICHARD M	22 NAME	
STREET ADDRESS	6405 N FEDERAL HWY #300	23 STREET ADDRESS	1900 E. Commercial Blvd
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	24 CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	TD	31 TITLE	☒ Change ☐ Addition
NAME	MASTROLE, RICHARD K.	32 NAME	
STREET ADDRESS	6405 N FEDERAL HWY #300	33 STREET ADDRESS	1900 E. Commercial Blvd.
CITY-ST-ZIP	FT. LAUDERDALE FL	34 CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	SD	41 TITLE	☒ Change ☐ Addition
NAME	SUTHERLAND, GLEN E. M.D.	42 NAME	
STREET ADDRESS	6405 N FEDERAL HWY #300	43 STREET ADDRESS	1900 E. Commercial Blvd
CITY-ST-ZIP	FT. LAUDERDALE FL	44 CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information contained in this report is voluntarily furnished and 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: [signature] Robert S. Meigs, M.D. 3/8/95 (305) 351-5800
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Title — Date — Daytime Phone #

0018943 CP