FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F68420

CARDIOLOGY ASSOCIATES OF CHARLOTTE COUNTY, P.A.

FILED Mar 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							AL BIBAL BIBIN BAB			
4130 TAMIAMI TRAIL. SUITE 100 4130 TAMIAMI TR PT. CHARLOTTE FL 33952 PT. CHARLOTTE F										
FI. UTVIKLUI	1E FL 33952	PT. CHARLOTTE FL 3395	92			DO NOT WRITE	E IN THIS SP/	4CE		
						3. Date Incorporated or Qualified				1
						02/23/1982				1
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For				
Suite, Apt.	# 010	Suite, Apt. #, etc.				59-2171328			ot Applicable	-
22 Suite, Apr.	#, etc.	27				5. Certificate of Status Desired			Additional equired	
City & Stat	е	City & State				6. Election Campaign Financing	_	\$5.00	May Be	
23		28				Trust Fund Contribution		Added	to Fees	ļ
Zip				intry	6. This corporation of the paid the content year in			_	- *	١
4 25 29 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30.					No	ł
04		it Hogistorou Agoin		B1	Name	10, Name and Address of New Ne	giatorou Agr		 -	1
GARETT, ROBERT B. 4130 TAMIAMI TRAIL, SUITE 100										1
	RT CHARLOTTE 33952			82	Street Addres	ress (P.O. Box Number is Not Acceptable)				l
	III Olimicotte obbee			83						ĺ
			i		A.:					ļ
			,	84	City		FL ^l	85 Zip (Code	l
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	les, the a	-evoc	named corpor	ration submits this statement for the	purpose of ch	anging it	s registered	1
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was ations of, Section 607.0505, Fl	authorize orida Stal	o by t lutes.	ne corporation	his board of directors. I hereby acce	pt the appoin	tment as	registered	l
SIGNATURE	· -									ĺ
<u> </u>	Signature, typed or printed name of registered age		E: Registere	d Agent	signature required		DATE			F
12,	OFFICERS ANI	D DELETE	13.		-	ADDITIONS/CHANGES TO OFFICE		IRECTOR Change	Addition	ł
TITLE	ROSENFIELD, LOUIS D.	□ Detete	1	TLE 🊅	'			Change	LJ Addition	13
NAME	~-258 TAIT TERRACE		1.2 N) a beorge RD.				18
STREET ADDRESS	PT. CHARLOTTE FL		- 1	REET AC		OBURUE NO.				Į
TITLE	-8	DELETE	2.1 TI	TY-ST-	V.F)		Change	Addition	15
NAME	RUGGIERI, DAVID E.	□ steete	2.2 N		זיע	•) oracingo	LJ Modition	
STREET ADDRESS	25188 MARION AVE, #1040			REET AD	nnress					Ĺ
CITY-ST-ZIP	PUNTA GORDA FL			ITY-ST-						
TITLE		☐ DELETE	3.1 TI					Change	Addition	1
NAME	GARRETT, ROBERT B.		3.2 N/	LME	"			-		
STREET ADDRESS	4120 CORONADO DRIVE		3.3 ST	REET AC	DORESS 22	446 LAGUABOÌADR. ET CHARLOHE, FL				
CITY-ST-ZIP	PUNTA GORDA FL		3.4. C	ITY-ST-	ZIP PO	RT CHARLOHE, FL	•			ĺ
TITLE	₩	DELETE	4,1 TO	TLE	P		E	Change	Addition	
NAME	POPPER, PAUL M.		4. 2 N	AME	1)					
STREET ADDRESS	2100 JAMAICA WAY		4.3 \$1	REET AD	DORESS					
CITY-ST-ZIP	PUNTA GORDA FL		4.4 CI	TY-ST-	ZIP .					
TITLE		DELETE	5.1 TI	TLE				Change	☐ Addition	
NAME			5.2 N/	ME						
STREET ADDRESS			5.3 S1	REET AC	ODRESS					
CITY-ST-ZIP	<u> </u>			<u>TY-</u> ST-	ZIP	······································			——————————————————————————————————————	Į
TITLE	•	DELETE	6.1 T∤) Change	Addition	l
NAME			6.2 NA		J					
STREET ADDRESS			6.3 ST	reet ad	DDRESS					1
CITY-ST-ZIP			6.4 CI	TY-ST-	ZIP	4.00				

I hereby certify that the information supplied with the indicated on this annual report or supplemental and officer or director of the corporation of the deciver Block 12 or Block 13 if changed; or on an attack free is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information wal report is true and securate and that my signature shall have the same legal effect as if made under oath; that I am an effusive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

941-629-4500