

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G00157 (9)**

1. Corporation Name

WINTER PARK FAMILY PRACTICE ASSOCIATES, INC.



Principal Place of Business

**2830 CASA ALOMA WAY
2830 CASA ALOMA WAY
WINTER PARK FL 32792**

Mailing Address

**2830 CASA ALOMA WAY
2830 CASA ALOMA WAY
WINTER PARK FL 32792**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

09/16/1982

3a. Date of Last Report

02/28/1995

4. FEI Number

59-2218290

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

**MASSEY, GARY
112 W. CITRUS STREET
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

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 607.0902 and 607.1505, 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 607.0905, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
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99. STREET ADDRESS
100. CITY, ST, ZIP

**PTD
SAMANO, GREGORY P
2830 CASA ALOMA WAY
WINTER PARK, FL 00000
VSD
SAMANO, MARGARET M
2830 CASA ALOMA WAY
WINTER PARK, FL 00000**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE
6. NAME
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☐ Change ☐ Addition

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SIGNATURE:

Margaret M. Samano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-96

407-678-5554

CR2E034 (12/95)