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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # G18869 (9) PRESTON A. WHALEY, M.D., P.A. Principal Place of Business Mailing Address 2010 59TH ST. W. 2010 59TH ST. W. SUITE #3500 SUITE #3500 DO NOT WRITE IN THIS SPACE **BRADENTON FL 34209** BRADENTON FL 34209 3. Date Incorporated or Qualified 01/10/1983 2a. Mailing Address. 26 2043 79 57. N.W. 2. Principal Place of Business 4. FE! Number Applied For 250 24 37, East 59-2245175 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State **\$5.00** May Be 6. Election Campaign Financing BRADENTON 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has pald the current year Intangible as.A. 34209 4.5.A ☐ Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WHALEY, M.D. P 2010 59TH ST. W. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE #3500 83 **BRADENTON FL 34209** 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE 12. 13. DELETE 7ITI F 1.1 TITLE ☐ Change ☐ Addition WHALEY, PRESTON A NAME 1.2 NAME **CR2E034** 5801 21ST AVE., WEST STREET ADDRESS 1.3 STREET ADDRESS BRADENTON, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 COY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

792-4126

Change

Addition