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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 1. Corporation Name

(1)

HOSPITAL MEDICAL STAFF SELF-INSURANCE TRUST, INC  Incipal Place of Business Mailing Address									
incipal Place of Business  C/O ROLLINS HUDIG HALL OF FLORIDA. INC. 201 ALHAMBRA CIR 8TH FLOOR  CORAL GABLES FL 33134  Mailing Address  C/O ROLLINS HUDIG HALL OF FLORIDA. INC. 201 ALHAMBRA CIR 8TH FLOOR  CORAL GABLES FL 33134					RIDA. INC.				1011 91011 1001
						3. Date Incorporated or Qualified 06/12/1986	3a. Date of 02/1	Last Rec  4/199	
rincipal Pla	ice of Business	2a. Mailing Ad	ldress			4. FEI Number 65-6002372		$\vdash$	oplied For ot Applicable
uite Apl #	, etc.	Suite, Apt.	. #, etc.		···	5. Certificate of Status Desired			Additional
ty & State		City & Stal	le			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be
ıtı	Country 25	Ζ(ρ 29		Country 30		8. This corporation has liability for i	ntangible tax ur		
	9. Name and Address of Current					10. Name and Address of New R		ent	
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	t, frances B. Llins hudig hall of florida	INC	82 Street Add		ress (P.O. Box Number is Not Acceptab	le)			
201 ALH	IAMBRA CIR 8TH FLOOR	i, 11 <b>1</b> 0.		83					<del></del>
CORAL	GABLES FL 33134			84	City		<b>_</b> _, [8	35 Zip (	Code
	o the provisions of Sections 607.0502	and 607.1508. Flor	rida Statutes	the above-r	named corpor	ration submits this statement for the pur	FL	no ite rec	vietered off
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or registere amihar with IANURE	n, and accept the obligations of, Sections of Sections by a complete section of the complete section o	on 607.0505, Florid ad title if applicable: DDRECTORS	na Statutes.	Registered Agen	enujver ekutar igez fr	50 when reinstating)  ADDITIONS/CHANGES TO OFFI			
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Dayt-me Phone ≢