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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State (9)

A ROBERTHA MOR REGIO ALTER EKONE DEBOG KOM DEDEN BARIL DEDEN BEDEN BEGLE DER ANDE

1996

DOCUMENT # K1
1. Corporation Name

SIGNATURE: SIGNATURE AND TYPED

(6)

ORLANDO FAMILY PRACTICE ASSOCIATES, P.A.

<del> </del>							IJA OMR DIUI		OLDII DIULI IUUI
Principal Place of 8793 COMMO		Mailing Address  8793 COMMODITY CIF	RCLE						
1650-SAND-L	<del>VKE-RD.: 8TE 120-</del>	1850 SAND LAKE RD. ORLANDO FL 32819							
ORLANDO FL US	32819	US US			3. Date Incorporated or Qu 01/15/1988	alified	3a. Date 0	of Last He 1/31/199	
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number	(0.1	224622	- A	pplied For
		26			<del>-59-2861907-</del>	570	320922		ot Applicable Additional
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Des	sired			equired
City & State		City & State			6. Election Campaign Finar Trust Fund Contribution	_			May Be to Fees
Zip	Country	Zip	Country	/	8. This corporation has liab			under s	199.032,
]	25	29	30		Florida Statutes  10. Name and Address of	Yes		cont	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of	New Ne	-Bistelen W	Seur	
1650 SA ORLAND	, CALVIN L., M.D. <del>NDLAKE RD SUITE 120</del> <del>O FL 92909-4671</del>		82 83 84	Oil Oil	13 COMMODITE  Lando	<del>) ("</del>	FL		z <sup>c</sup> 8619
OF FOOISTORS	the provisions of Sections 607.0502 if d agent, or both, in the State of Florid , and accept the obligations of, Section	a Suco coande was auctorz	BU DY LITE COL	named corpor poration's boa	ration submits this statement to ard of directors. I hereby accept	the appo	intment as i	egistered	agent. I am
HGNATI IRE					and when rejustation)		DATE		
SIGNATURE S	ignature, typed or printed name of registered agent a	no are a opposition	<u> </u>	ent signature require	ed when reinslating)  ADDITIONS/CHANGES	TO OFFI	DATE CERS AND	DIRECTO	RS IN 12
SIGNATURE S	ignature, typod or printed name of registered agent a OFFICERS AND	no are a opposition	TE: Registered Ag		ed when reinslating! ADDITIONS/CHANGES	TO OFFIC	CERS AND	DIRECTO Change	RS IN 12
SIGNATURE S	grature, typed or printed name of registered agent a OFFICERS AND	DIRECTORS	13.			TO OFFI	CERS AND		
SIGNATURE S  2.  ITLE  AME	ignature, typed or printed name of registered agent a OFFICERS AND PT GIBSON, CALVIN L., M.D.	DIRECTORS	13. 1. 1 TITLE 1.2 NAME			TO OFFIC	CERS AND		
IGNATURE S  2.  TLE  AME IHEET ADDRESS	grature, typed or printed name of registered agent a OFFICERS AND	DIRECTORS	13. 1. 1 TITLE 1.2 NAME	ET ADDRESS		TO OFFIC	CERS AND	] Change	Addition
IGNATURE S  2. ITLE AME IHEET ADDRESS ITY-ST-ZIP	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND		Addition
IGNATURE S  2.  ITLE  AME IREET ADDRESS ITY-ST-ZIP ITLE	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D.	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY	ET ADDRESS - S1-ZIP		TO OFFI	CERS AND	] Change	Addition
IGNATURE S  2.  ILE AME IHEET ADDRESS ITY-ST-ZIP ILE AME	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS	DIRECTORS  DELETE	13. 1.3 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 22 NAME	ET ADDRESS - S1-ZIP		TO OFFIC	CERS AND	] Change	Addition
CONATURE S  2.  ILE  AME  IHEET ADDRESS  ITY-ST-ZIP  ILE  AME  IREET ADDRESS	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D.	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY	ET ADDRESS .S1-ZIP ET ADDRESS .S1-ZIP		TO OFFI	CERS AND	] Change	Addition
IGNATURE  S  2.  ILE  AME  IHEET ADDRESS  ITY-ST-ZIP  ILE  AME  TREET ADDRESS  ITY-ST-ZIP	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE	ET ADDRESS -S1-ZIP		TO OFFI	CERS AND	] Change	Addition
IGNATURE S  2.  ILE  AME  IHEET ADDRESS  ITY-ST-ZIP  ILLE  AME  ITREET ADDRESS  ITY-ST-ZIP  ILLE  ITREET ADDRESS	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME	ET ADDRESS -S1-ZIP		TO OFFI	CERS AND	] Change	Addition
IGNATURE S  2.  ILE  AME  IREET ADDRESS  ITY-ST-ZIP  ILE  AME  IREET ADDRESS  ITY-ST-ZIP  ILE  AME  AME  AME  AME  AME  AME  AME  A	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREF 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE	ET ADDRESS -S1-ZIP		TO OFFI	CERS AND	] Change	Addition
IGNATURE S  2.  TLE AME IHEET ADDRESS ITY-ST-ZIP ITLE AME IN-ST-ZIP ILLE AME TREET ADDRESS ITY-ST-ZIP ILLE AME TREET ADDRESS ITY-ST-ZIP ILLE AME	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY	ET ADDRESS -S1-ZIP		TO OFFI	CERS AND	] Change	Addition  Addition
IGNATURE  2.  TLE  AME  IHEET ADDRESS  ITY-ST-ZIP  ILE  AME  TREET ADDRESS  ITY-ST-ZIP  ILE  AME  AME  TREET ADDRESS  ITY-ST-ZIP  ILE  AME  TREET ADDRESS  ITY-ST-ZIP  ILE  AME  TREET ADDRESS  ITY-ST-ZIP  ILE  ITREET ADDRESS	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 4.4 CITY 4.1 TITLE	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND	Change Change Change	Addition  Addition
IGNATURE  2.  TLE  AME  THEET ADDRESS  ITY-ST-ZIP  THEE  AME  TREET ADDRESS  ITY-ST-ZIP  THEE  AME  TREET ADDRESS  THEET	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 4.1 TITLE 4.2 NAME 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.3 NAME 4.4 CITY 4.4 NAME 4.4	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND	Change Change Change	Addition  Addition
IGNATURE S  2.  TLE  AME  IHEET ADDRESS  ITY - ST - ZIP  ITHE  AME  TREET ADDRESS  ITY - ST - ZIP  ITHE  AME  TREET ADDRESS  ITY - ST - ZIP  ITHE  ITH	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY 4.1 TITLE 4.2 NAME 4.3 STREE 4.3 STREE 4.3 STREE 4.3 STREE 4.4 STREE 4.3 STREE	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND	Change Change Change	Addition  Addition
IGNATURE S  2.  TLE AME IHEET ADDRESS ITY - ST - ZIP ITLE AME TREET ADDRESS ITY - ST - ZIP ITLE AME TREET ADDRESS ITY - ST - ZIP ITLE AME TREET ADDRESS ITY - ST - ZIP ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 4.1 TITLE 4.2 NAME 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.3 NAME 4.4 CITY 4.4 NAME 4.4	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND	Change Change Change	Addition  Addition
GNATURE  S  2.  TILE  MME  IREET ADDRESS  ITY - ST - ZIP  ILE  AME  TREET ADDRESS  INY - ST - ZIP  ILE  AME  INY - ST - ZIP  ILE  AME  INY - ST - ZIP  ILE  AME  INY - ST - ZIP  ILE  INY - ST - ZIP  ITREET ADDRESS  INY - ST - ZIP	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAME 3.3 STRE 4.1 TITL 4.2 NAME 4.3 STRE 4.4 CITY 4.1 STRE 4.4 CITY	ET ADDRESS -S1-ZIP		TO OFFIC	CERS AND	Change Change Change	Addition  Addition
IGNATURE S  2.  TILE AME IREET ADDRESS IRY - ST - ZIP IILE AME TREET ADDRESS INY - ST - ZIP IILE AME TREET ADDRESS INY - ST - ZIP IILE INTERET ADDRESS INY - ST - ZIP IILE IAME IAME IAME IAME IAME IAME IAME IAM	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 22 NAME 2 3 STRE 24 CITY 3.1 TITL 32 NAME 33 STREE 4.1 TITL 42 NAME 4.3 STREE 4.4 CITY 5.1 TITL 52 NAME 52 NAME 53 STREE 54 NAME 64 CITY 65 NAME 6	ET ADDRESS S1-ZIP ET ADDRESS -S1-ZIP E E E E E E E E E E E E E E E E E E E		TO OFFI	CERS AND	Change Change Change	Addition  Addition
IGNATURE  2.  TILE  AME  IREET ADDRESS  ITY-ST-ZIP  TILE  AME  TREET ADDRESS  ITY-ST-ZIP  TILE  AME  TREET ADDRESS  ATY-ST-ZIP  TILE  ITHE  ITH	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 22 NAME 2 3 STREE 2.4 CITY 3.1 TITL 3.2 NAME 3.3 STREE 4.1 TITL 4.2 NAME 4.3 STREE 4.4 CITY 5.1 TITL 5.2 NAME 5.3 STREE 5.3	ET ADDRESS S1-ZIP ET ADDRESS -S1-ZIP E E E E E ADDRESS -S1-ZIP E E E E E E E E ADDRESS -S1-ZIP E E E E E ADDRESS -S1-ZIP E E E E E ADDRESS		TO OFFI	CERS AND	Change Change Change	Addition Addition Addition Addition
IGNATURE  2.  TLE  AME  IREET ADDRESS  ITY-ST-ZIP  ITHE  AME  TREET ADDRESS  ITY-ST-ZIP  ITHE  I	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 22 NAME 2 3 STREE 2.4 CITY 3.1 TITL 3.2 NAME 3.3 STREE 4.1 TITL 4.2 NAME 4.3 STREE 4.4 CITY 5.1 TITL 5.2 NAME 5.3 STREE 5.3	ET ADDRESS S1-ZIP ET ADDRESS -S1-ZIP E EET ADDRESS -S1-ZIP E EET ADDRESS -S1-ZIP E EET ADDRESS -S1-ZIP E EET ADDRESS -S1-ZIP		TO OFFI	CERS AND	Change Change Change	Addition Addition Addition Addition
CITY-ST-ZIP  ITHE  AME  IREET ADDRESS  ITY-ST-ZIP  ITHE  IAME  ITHEET ADDRESS  ITY-ST-ZIP  ITHE  IAME  ITHEET ADDRESS  ITY-ST-ZIP  ITHEET ADDRESS  ITHEET ADDR	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 22 NAME 2 3 STRE 24 CITY 3.1 TITL 32 NAME 33 STREE 4.1 TITL 42 NAME 4.3 STREE 4.4 CITY 5.1 TITL 52 NAME 5.3 STREE 5.4 CITY	ET ADDRESS S1-ZIP E ET ADDRESS -S1-ZIP E E ET ADDRESS -S1-ZIP E E E ET ADDRESS -S1-ZIP E E E ET ADDRESS -S1-ZIP E E E E E E E E E E E E E E E E E E E		TO OFFI	CERS AND	Change Change Change Change	Addition Addition Addition Addition
SIGNATURE  SITE  VAME SINEET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITL 3.2 NAME 3.3 STREE 4.1 TITL 4.2 NAME 4.3 STREE 4.4 CITY 5.1 TITL 5.2 NAME 5.3 STREE 5.4 CITY 6.1 TITL 6.2 NAME 6.1 TITL 6.2 NAME 6.3 STREE 6.4 CITY 6.4 C	ET ADDRESS S1-ZIP E ET ADDRESS -S1-ZIP E E ET ADDRESS -S1-ZIP E E E ET ADDRESS -S1-ZIP E E E ET ADDRESS -S1-ZIP E E E E E E E E E E E E E E E E E E E		TO OFFI	CERS AND	Change Change Change Change	
SIGNATURE  SITE STATE ST	PT GIBSON, CALVIN L., M.D. 8793 COMMODITY CIRCLE ORLANDO FL VS MEARES, MICHAEL J.,M.D. 8793 COMMODITY CIRCLE	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 22 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 32 NAME 33. STREE 4.4 CITY 4.1 TITLE 42 NAME 4.3 STREE 4.4 CITY 5.1 TITLE 52 NAME 5.3 STREE 5.4 CITY 6.1 TITLE 6.2 NAME 6.3 STREE	ET ADDRESS -S1-ZIP E ET ADDRESS -S1-ZIP E E EET ADDRESS	ADDITIONS/CHANGES		CERS AND	Change Change Change Change	Addition Addition Addition Addition Addition

president