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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000036264 (8)

OCALA NEUROSURGICAL CENTER, INC.

Principal Place of Business 1105 SW 18T AVE OCALA FL 34471	Mailing Address 1105 SW 18T AVE OCALA FL 34474-4218	1105 SW 1ST AVE			
			3. Date incorporated or Qualified 05/13/1993	3a. Date of Last Report 03/29/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Sollo And H. etc.	Suite, Apt. #, etc.		59-3178177	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
	28		Trust Fund Contribution	Added to Fees	
Zip Country	·	Country	8. This corporation has liability for	intangible tax under s. 199.032, X Yes No	
9 Name and Addre	29 29 29 29 29 29 29 29 29 29 29 29 29 2	[30]	Florida Statutes 10. Name and Address of New R	.	
KAPLAN, BARRY J		81 Name			
1105 SW 1ST AVE		82 Street A	ddress (P.O. Box Number is Not Accepta	-hle)	
OCALA FL 34471			adites (F.O. DOX Humber is 110) Nocopie	unie)	
		83			
		84 City		FL 85 Zip Code	
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GNATURE Sign of the Sign of the pointed markets.	DEFICERS AND DIRECTORS	ote Flegislered Agent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
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SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

Barry J. Kaplan, MD

4110197 (352)622-3360

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Apr 16 1997 8:00am

Secretary of State