

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

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P 97000033581  
1. Corporation Name  
J.M. Carson, M.D., P.A.

Principal Place of Business: 131 SW 5th Street Ocala, FL 34474  
Mailing Address: 131 SW 15th Street Ocala, FL 34474

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 County  
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3. Date Incorporated or Qualified: 4-11-97  
4. F.I.L. Number: 59-3459432  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30:  Yes  No

9. Name and Address of Current Registered Agent  
Larry Wolf  
200-A John Knox Road  
Tallahassee, FL 32303-6643

10. Name and Address of New Registered Agent  
81 Name: J.M. Carson, M.D.  
82 Street Address (P.O. Box Number is Not Acceptable): 131 SW 15th Street  
83  
84 City: Ocala FL 85 Zip Code: 34474

11. Pursuant to the provisions of Sections 607.07(3)(a), 607.08(1), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent to those in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the corporation and accept the obligations of Section 607.08(1), Florida Statutes.

SIGNATURE: J.M. CARSON, M.D. DATE: 4/27/98

12. OFFICERS AND DIRECTORS  
1. TITLE: D.P.  
2. NAME: Jon M. Carson, M.D.  
3. STREET ADDRESS: 131 SW 15th Street  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
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14. I hereby certify that the information appearing hereon does not qualify for the exemption stated in Section 19.07(3)(b), Florida Statutes. I further certify that the information included on this 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 and that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report in accordance with said address.

SIGNATURE: J.M. CARSON, M.D. DATE: 4/27/98 FILING NO: 352-351-8497

CR2E034 (10/97)