

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

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1997 JUN 23 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # V50817 (8)  
1. Corporation Name  
NAPLES MEDICAL CENTER, P.A.

Principal Place of Business: 400 8TH STREET NORTH, NAPLES, FL 34102  
Mailing Address: 400 8TH STREET NORTH, NAPLES, FL 34102

3. Date Incorporated or Qualified: 07/15/1992  
3a. Date of Last Report: 04/18/1996  
4. FLI Number: 65-0332909  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business (21-24)  
2a. Mailing Address (25-29)  
22. Suite, Apt. #, etc.  
27. Suite, Apt. #, etc.  
23. City & State  
28. City & State  
24. Zip, Country  
29. Zip, Country

9. Name and Address of Current Registered Agent  
WHITTEMORE, DOUGLAS  
400 8TH STREET NORTH  
NAPLES, FL 34102

10. Name and Address of New Registered Agent  
81. Name: 500002221105--1  
82. Street Address (P.O. Box Number is Not Permitted): 08924797--01031--025  
83. \*\*\*\*165.00 \*\*\*\*165.00  
84. City: FL  
85. 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: \_\_\_\_\_ (NOTE: Registered Agent's signature required when registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	DS	<input type="checkbox"/> DELETE
NAME	BOYNTON, DOUGLAS	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	BUYSSE, CHARLES	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	MORRIS, DANIEL J.	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	CASE, GARY	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ADAMSON, DALE B.	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	WILSON, ROBERT W.	
STREET ADDRESS	400 8TH STREET NORTH	
CITY-ST-ZIP	NAPLES, FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	SEALS, M. TAITE	
13. STREET ADDRESS	400 8TH STREET NORTH	
14. CITY-ST-ZIP	NAPLES, FL	
21. TITLE	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	SHIELDS, PAUL J.	
23. STREET ADDRESS	400 8TH STREET NORTH	
24. CITY-ST-ZIP	NAPLES, FL	
31. TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32. NAME	ROLAND, RICHARD M.	
33. STREET ADDRESS	400 8TH STREET NORTH	
34. CITY-ST-ZIP	NAPLES, FL	
41. TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42. NAME	DREW, DANIEL J.	
43. STREET ADDRESS	400 8TH STREET NORTH	
44. CITY-ST-ZIP	NAPLES, FL	
51. TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52. NAME	BUSER, DAVID P.	
53. STREET ADDRESS	400 8TH STREET NORTH	
54. CITY-ST-ZIP	NAPLES, FL	
61. TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62. NAME	ANAND, PAVAN K	
63. STREET ADDRESS	400 8TH STREET NORTH	
64. CITY-ST-ZIP	NAPLES, FL	

14. I do 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 or authorized person 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 or in an attachment with an address.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: June 20, 1997  
Daytime Phone #

CFR2E034 (9/96)

*1500  
6/23/97*

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OFFICERS/DIRECTORS (CONTINUED)

V  
EDWIN J. DEAN  
400 8TH STREET NORTH  
NAPLES, FL

V  
CHARLES S. EYTEL  
400 8TH STREET NORTH  
NAPLES, FL

V  
JOSEPH RICHICHI  
400 8TH STREET NORTH  
NAPLES, FL

V  
ALBERT L. KERNS  
400 8TH STREET NORTH  
NAPLES, FL

V  
RAYMOND L. DUNCAN  
400 8TH STREET NORTH  
NAPLES, FL

V  
JILL V. HICKEY  
400 8TH STREET NORTH  
NAPLES, FL

V  
GARY C. COURVILLE  
400 8TH STREET NORTH  
NAPLES, FL

V  
CATHERINE N. KOWAL  
400 8TH STREET NORTH  
NAPLES, FL

V  
ALAN S. GALBUT  
400 8TH STREET NORTH  
NAPLES, FL

V  
TERRANCE A. HAVIG  
400 8TH STREET NORTH  
NAPLES, FL

V  
MATTHEW P. POWERS  
400 8TH STREET NORTH  
NAPLES, FL

V  
LESLIE J. SCHULTZEL  
400 8TH STREET NORTH  
NAPLES, FL

V  
WILLIAM R. COOK  
400 8TH STREET NORTH  
NAPLES, FL

V  
EUGENE F. BURKE  
400 8TH STREET NORTH  
NAPLES, FL

V  
RALPH J. DOTSON  
400 8TH STREET NORTH  
NAPLES, FL

V  
KENDALL WISE  
400 8TH STREET NORTH  
NAPLES, FL

V  
JAMES M. VENABLE III  
400 8TH STREET NORTH  
NAPLES, FL

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OFFICERS/DIRECTORS - DELETIONS  
(VICE PRESIDENTS)

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V  
CAROLYN VENABLE  
400 8TH STREET NORTH  
NAPLES, FL

JOHN R. DIAZ  
400 8TH STREET NORTH  
NAPLES, FL

V  
FRANCIS D. HUSSEY  
400 8TH STREET NORTH  
NAPLES, FL

HOWARD BAUGHMAN  
400 8TH STREET NORTH  
NAPLES, FL

DV  
UNDERWOOD, C. RICHARD  
400 8TH STREET NORTH  
NAPLES, FL

DESMOND F. HUSSEY III  
400 8TH STREET NORTH  
NAPLES, FL

EDWIN E. DEAN  
400 8TH STREET NORTH