

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 8:58

DOCUMENT # **453705** (6)

1. Corporation Name

JEFFREY J. KROLL, M.D., P.A.

Principal Place of Business

**3000 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065**

Mailing Address

**3000 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1974

3a. Date of Last Report

03/30/1994

4. FEI Number

59-1531705

Applied For

☐ Not Applicable

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

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**KROLL, JEFFREY J.
3000 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

**PD
KROLL, JEFFREY J.
3000 UNIVERSITY DRIVE
CORAL SPRINGS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST. ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST. ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST. ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST. ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST. ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST. ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST. ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if such officer or director of the corporation or the receiver or trustee 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 on an attachment with an address.

SIGNATURE:

(Signature)
NOTED OR SIGNED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey J. Kroll

x 3/29/95

305-255-1288
(Telephone Number)