

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 29, 2004 8:00 am
Secretary of State

07-29-2004 90005 001 ***150.00

DOCUMENT # 459837

1. Entity Name

JOHN J. BRADY, M.D. P.A.



Principal Place of Business

301 TURNER ST
CLEARWATER FL 34616
US

Mailing Address

315 PONCE DE LEON BLVD.
BELLEAIR FL 33756
US

2. Principal Place of Business

315 Ponce de Leon Blvd

3. Mailing Address

Suite, Apt., #, etc.

City & State

Belleair FL

City & State

Zip

33756

Country

Pinellas

Country

4. FEI Number

59-1551721

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARQUARDT, JR. EMIL C.
400 CLEVELAND STREET
CLEARWATER FL 33516

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	BRADY, JOHN J., M.D.	
STREET ADDRESS	301 TURNER ST	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DS	<input type="checkbox"/> Delete
NAME	MARQUARDT, EMIL C., JR.	
STREET ADDRESS	400 CLEVELAND ST.	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRADY, MARY	
STREET ADDRESS	315 PONCE DE LEON BLVD.	
CITY-ST-ZIP	BELLEAIR FL 33756	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 report or supplemental 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John J. Brady MD PA John J. Brady MD PA 7/26/04 727 586 4506

Attachment 54065765-9

459 837

July 25, 2004

John J. Brady M.D, P. A.
315 Ponce de Leon Blvd.
Belleair, Florida 33756

Division of Corporations
P. O. Box 850
Tallahassee, Florida 32314

Dear Sir:

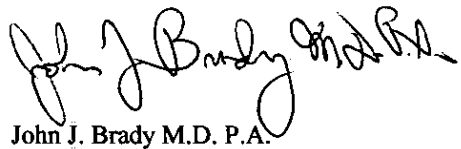
My corporation did not receive a prior notice. Apparently, it was sent to the wrong address and not forwarded.

My address has changed from Turner St. Clearwater to 315 Ponce de Leon Blvd., Belleair, Florida 33756.

Enclosed is my check for \$150.00.

Thank you for your patience.

Sincerely,



John J. Brady M.D. P.A.

JJB/M