

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 521038

(0)

1. Corporation Name

RICHARD ROTELLA, M.D., P.A.



Principal Place of Business

5800 49TH STREET NORTH
SUITE S 102
ST. PETERSBURG FL 33709

Mailing Address

5800 49TH STREET NORTH
SUITE S 102
ST. PETERSBURG FL 33709

2. Principal Place of Business

2a. Mailing Address

21 515 161st Avenue

26 515 161st Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Redington Beach, FL

28 Redington Beach, FL

Zip

Country

Zip

Country

24 33708

25 Pinellas

29 33708

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROTELLA, RICHARD
5800 49TH ST NO., SUITE S 102
ST. PETERSBURG FL 33709

81 Name

Richard Rotella

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

515 161st Avenue

83

Redington Beach

84 City

Redington Beach

85

Zip Code

33708

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 607.0502, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/23/96

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ROTELLA, RICHARD
STREET ADDRESS 5800 49TH ST NO.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ST ☐ DELETE

NAME ROTELLA, RICHARD
STREET ADDRESS 5800 49TH ST NO.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☐ Addition

1.2 NAME Richard Rotella
1.3 STREET ADDRESS 515 161st Avenue
1.4 CITY-ST-ZIP Redington Beach, FL 33708

2.1 TITLE ST ☐ Change ☐ Addition

2.2 NAME Richard Rotella
2.3 STREET ADDRESS 515 161st Avenue
2.4 CITY-ST-ZIP Redington Beach, FL 33708

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(k), 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

Date

(813) 391-2658

Daytime Phone