

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
James B. Nevelum
Secretary of State
Tallahassee, Florida 32399-0400

APR 16 20
1996

55 MAY - 1 JUN 1995

RECORDS SECTION
TALLAHASSEE, FLORIDA

DOCUMENT # 521309

(5)

1. Corporation Name

ROGER K. LEWIS, M.D., P.A.

Principal Place of Business

695 N CLYDE MORRIS BLVD
DAYTONA BCH. FL 32114

Mailing Address

695 N CLYDE MORRIS BLVD
DAYTONA BCH. FL 32114

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

12/30/1976

3a. Date of Last Report

03/02/1994

4. FEI Number

59-1714517

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 § 194.10(2)
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

State Apt # etc.

22

City & State

23

24

25

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2a. Mailing Address

26

State Apt # etc.

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City & State

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEWIS, ROGER K.
175 JOHN ANDERSON DRIVE
ORMOND BEACH, FLORIDA 32074

81 Name

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

695 N. CLYDE MORRIS BLVD

83

84 City DAYTONA BEACH

FL

85 Zip Code 32114

11. Pursuant to the provisions of Sections 607.0902 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. Thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (must be signed by the agent)

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SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROGER K. LEWIS, M.D.

X