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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 544672

1. Corporation Name

(9)

THOMAS N. TRUNNELL, M.D., P.A.

**FILED** Mar 11, 1996 08:00 AM **Secretary of State** 



Extra de la marco				<del> </del>							
Principal Pa	ace of Business		Mailing Address			}	1 +841E1 E111 E1111		***************************************	#1 <b>0</b> 11 <b>1</b> 18()	ecent Athly 1861
13801 BRUCE B DOWNS BV SUITE 306			13801 BRUCE B DOWNS BV SUITE 306 TAMPA FL 33613-3911			]					
SUITE 306 TAMPA FL 33613-3911		1					····	<u>,</u>			
							3. Date Incorporated	or Qualified	3a. Date		•
2. Principal	Place of Business		2a. Mailing Address	<del>.</del>			09/01/1977 4. FEI Number			<u>/22/199</u>	
21	TRICE OF DUSINGSS		26. Walling Address	•			59-175307	1		— — 1.	Applied For Not Applicable
Suite Ar	ol.#, etc.		Suite, Apt. #, et	C.							Additional
22			27				5. Certificate of Statu	ıs Desired			Required
City & St	tate		City & State				6. Election Campaign	n Financing	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$5.0	O May Be
23			28				Trust Fund Contril	oution			d to Fees
<i>Ζ</i> φ	<b></b> 1	Country	<i>Z</i> φ		ountry		8. This corporation h			under s	199.032,
24	o Name and	Address of Current	Registered Agent	30	· ·		Florida Statutes  10. Name and Addre		No No		
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TOLINE	JEH THOUSE !				L					···	
	NELL, THOMAS N BRUCE B. DOWN	IC DI VID			82 8	treet Address	s (P.O. Box Number is	Not Acceptab	le)		
SUITE		IS BLVD.			83						
	300 A FL 33613				$\perp \perp$				_		
(ANIL)	1 1 L 000 IU				84 0	lity			FL	85 Zi	o Code
11. Pursuai	nt to the provisions o	f Sections 607.0502 a	and 607,1508, Florida S	tatutes, the ab	 ove-nam	ed corporation	on submits this stateme	ent for the nur		naina its r	enistered offic
cir remite	tered agent, or both,	in the State of Florida	and 607.1508, Florida S n Such change was aut n 607.0505, Florida Sta	horized by the	corpora	tion's board o	of directors. I hereby a	cept the app	ointment as i	egistered	agent. I am
tamiliar										/	lai
	7		The same of						$\sim$	·~ //	
familiar SIGNATURE	Than		Thurs						- <u>2</u> /	29/	196
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certify that the miorniation 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: