

Jan 24 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 560947 (4)

1. Corporation Name

LARACH, WILLIAMSON &amp; FERRARA, M.D., P.A.

Principal Place of Business

110 W. UNDERWOOD ST  
% SERGIO W. LARACH  
ORLANDO FL 32806

Mailing Address

110 W. UNDERWOOD ST  
% SERGIO W. LARACH  
ORLANDO FL 32806-1132

3. Date Incorporated or Qualified

03/01/1978

3a. Date of Last Report

02/20/1996

4. FEI Number

59-1805986

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 # A

23 City &amp; State

24 Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

28 City &amp; State

29 Zip

Country

30

9. Name and Address of Current Registered Agent

LARACH, SERGIO W.  
110 W. UNDERWOOD ST  
ORLANDO FL 32806

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME LARACH, SERGIO W., M.D.

STREET ADDRESS 110 W. UNDERWOOD ST

CITY - ST - ZIP ORLANDO FL

TITLE ☐ DELETENAME ☐ DELETESTREET ADDRESS ☐ DELETECITY - ST - ZIP ☐ DELETETITLE ☐ DELETENAME ☐ DELETESTREET ADDRESS ☐ DELETECITY - ST - ZIP ☐ DELETETITLE ☐ DELETENAME ☐ DELETESTREET ADDRESS ☐ DELETECITY - ST - ZIP ☐ DELETETITLE ☐ DELETENAME ☐ DELETESTREET ADDRESS ☐ DELETECITY - ST - ZIP ☐ DELETETITLE ☐ DELETENAME ☐ DELETESTREET ADDRESS ☐ DELETECITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition12 NAME ☐ Change ☐ Addition13 STREET ADDRESS ☐ Change ☐ Addition14 CITY - ST - ZIP ☐ Change ☐ Addition21 TITLE ☐ Change ☐ Addition22 NAME ☐ Change ☐ Addition23 STREET ADDRESS ☐ Change ☐ Addition24 CITY - ST - ZIP ☐ Change ☐ Addition31 TITLE ☐ Change ☐ Addition32 NAME ☐ Change ☐ Addition33 STREET ADDRESS ☐ Change ☐ Addition34 CITY - ST - ZIP ☐ Change ☐ Addition41 TITLE ☐ Change ☐ Addition42 NAME ☐ Change ☐ Addition43 STREET ADDRESS ☐ Change ☐ Addition44 CITY - ST - ZIP ☐ Change ☐ Addition51 TITLE ☐ Change ☐ Addition52 NAME ☐ Change ☐ Addition53 STREET ADDRESS ☐ Change ☐ Addition54 CITY - ST - ZIP ☐ Change ☐ Addition61 TITLE ☐ Change ☐ Addition62 NAME ☐ Change ☐ Addition63 STREET ADDRESS ☐ Change ☐ Addition64 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do 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 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

1-14-97

Date

407-422-2790

Daytime Phone #