

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
CORPORATION
ANNUAL REPORT
1995

DOCUMENT # **588616** (3)

RAY C. WUNDERLICH, JR., M.D., P.A.

APPROVED
AND
FILED

9:22

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

666 6TH STREET SOUTH
SUITE 206
ST. PETERSBURG FL 33701-4889

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SUITE 206
ST. PETERSBURG FL 33701-4889

2. Principal Office Location	2a. Mailed Address	3. Date Report Due or Specified	3a. Date of Last Report
21. Number of Pages	26. Number of Pages	10/01/1978	04/07/1994
22. Number of Pages	27. Number of Pages	4. FID Number	Applied For
23. Number of Pages	28. Number of Pages	59-1852728	Not Applicable
24. Number of Pages	29. Number of Pages	5. Certificate of Status Issued	\$8.75 Additional Fee Required
25. Number of Pages	30. Number of Pages	6. Election Campaign Fund and Trust Fund Contribution	\$5.00 May Be Added to Fees
26. Number of Pages	31. Number of Pages	7. Does corporation have liability for advertisement under the Florida Statutes	Yes ☐ No ☐

9. Name and Address of Current Registered Agent

WUNDERLICH, RAY JR.
666 6TH STREET SOUTH
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. I, the undersigned, being duly sworn, depose and say that the above named corporation is a corporation organized under the laws of the State of Florida and that the undersigned is a resident of the State of Florida and is qualified to act as a registered agent for the corporation and to accept the obligations of a registered agent under the Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. AUTHORIZED CHANGES TO OFFICERS AND DIRECTORS	
NAME	WUNDERLICH, RAY C. J	NAME	
STREET ADDRESS	666 6TH ST. SOUTH	STREET ADDRESS	
CITY	ST PETE FL	CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

14. I, the undersigned, certify that the information supplied with this filing is verifiably true and correct and that the undersigned is a resident of the State of Florida and is qualified to act as a registered agent for the corporation and to accept the obligations of a registered agent under the Florida Statutes.

SIGNATURE:

Ray C. Wunderlich, Jr.,
M.D., P.A.

5-1-95

813-822-3612