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FILED  
Apr 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 600545 (8)

1. Corporation Name  
DRS. MORI, BEAN AND BROOKS, P. A.

Principal Place of Business  
3599 UNIVERSITY BLVD., SOUTH  
BLDG 300  
JACKSONVILLE FL 32216  
US

Mailing Address  
3599 UNIVERSITY BLVD., SOUTH  
BLDG 300  
JACKSONVILLE FL 32216  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1968

4. FEI Number

59-1226176

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

MORI, PAUL A  
3599 UNIVERSITY BLVD S  
BLDG 300  
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name Joseph Utz

82 Street Address (P.O. Box Number is Not Acceptable)  
3599 University Blvd. S. Bldg. 300

83

84 City Jacksonville

FL

85 Zip Code  
32216

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

4/9/98

12. OFFICERS AND DIRECTORS

TITLE P  
NAME MOORE, LUANN B  
STREET ADDRESS 3599 UNIVERSITY BLVD S BLDG 300  
CITY-ST-ZIP JACKSONVILLE, FL 00000 ☒ DELETE

TITLE V  
NAME FRANK SANCHEZ  
STREET ADDRESS 3599 UNIVERSITY BLVD S BLDG 300  
CITY-ST-ZIP JAX FL ☒ DELETE

TITLE T  
NAME R. STEPHEN SURRATT  
STREET ADDRESS 3599 UNIVERSITY BLVD S BLDG 300  
CITY-ST-ZIP JAX FL ☒ DELETE

TITLE S  
NAME UTZ, JOSEPH  
STREET ADDRESS 3599 UNIVERSITY BLVD S BLDG 300  
CITY-ST-ZIP JAX FL ☒ DELETE

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 President ☐ Change ☒ Addition  
1.2 NAME Joseph Utz  
1.3 STREET ADDRESS 3599 University Blvd. S. Bldg 300  
1.4 CITY-ST-ZIP Jacksonville, FL 32216

2.1 TITLE Vice-President ☐ Change ☒ Addition  
2.2 NAME R. Stephen Surratt  
2.3 STREET ADDRESS 3599 University Blvd. S. Bldg. 300  
2.4 CITY-ST-ZIP Jacksonville, FL 32216

3.1 TITLE Secretary/Treasurer ☐ Change ☒ Addition  
3.2 NAME Steve Shirley  
3.3 STREET ADDRESS 3599 University Blvd. S. Bldg 300  
3.4 CITY-ST-ZIP Jacksonville, FL 32216

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 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.

CR2E034 (10/97)