

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 600545

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

UTZ, JOSEPH  
3599 UNIVERSITY BLVD S  
BLDG 300  
JACKSONVILLE FL 32216

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 the current year Intangible  
Personal Property Tax.

Yes No

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
SHIRLEY, STEVE  
3599 UNIVERSITY BLVD S BLDG 300  
JAX FL 32216

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
ST  
Christine Granfield  
3599 University Blvd. S Bldg 300  
Sax, FL 32216

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/7/99

Date

Daytime Phone #

FILED  
Apr 15, 1999 8:00 am  
Secretary of State

04-15-1999 90084 046 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)