FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

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

19962-21 90 B - [redacted] C

DOCUMENT # 600566 (4) 1368

1. Corporation Name
HOBBY, SMITH & NANTAIS, M.D.'S, P.A.

HOBBY, SMITH & NANTAIS, M.D.'s, P.A.
2191 - 9th AVENUE NORTH, SUITE 120
ST. PETERSBURG, FL 33713

Principal Place of Business
~~615 11TH STREET NORTH~~ 2191 9th Ave N
ST. PETERSBURG FL ~~33705~~ Ste 120
33713

Mailing Address
~~615 11TH STREET NORTH~~
ST. PETERSBURG FL ~~33706~~

3. Date Incorporated or Qualified: 11/13/1968
3a. Date of Last Report: 04/10/1995

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: 59-1224060 ☐ 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 has liability for intangible tax under s 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

HOBBY, ROYCE
~~615 11TH STREET NORTH~~ 2191 9th Ave N, Ste 120
ST PETERSBURG FL ~~33705~~ 33713

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, type or print name of registered agent and date required) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOBBY, ROYCE ~~615 11TH STREET NORTH~~ ST PETERSBURG, FL ~~00000~~ ☐ DELETE	1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP	☑ Change ☐ Addition 2191 9th Ave N. Suite 120 33713
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP~~ SMITH, MICHAEL J ~~615 11TH STREET NORTH~~ ~~ST PETERSBURG, FL 00000~~ ☐ DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP	☑ Change ☐ Addition Secretary 2191 9th Ave N Ste 120 33713
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP	☐ Change ☑ Addition Vice President Nantais, Robert P. 2191 9th Ave N Ste 120 St. Petersburg FL 33713
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Royce Hobby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #