

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Barbara B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED
95 FED 11 PM 12:06

DOCUMENT # 600619

(1)

1. Corporation Name:

MARK S. BEATTY, M.D., P.A.

Principal Place of Business:

931 E OCEAN BLVD
STUART FL 34994-2429

931 E OCEAN BLVD
STUART FL 34994-2429

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	23. Mailing Address 26	3. Date Incorporated or Organized 12/03/1968	3a. Date of Last Report 03/01/1994
State, City & Zip 22	Date, City & Zip 27	4. File Number 59-1225977	4a. Applied For Not Applicable
City & State 23		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		7. This corporation has liability for intangible tax under S. 109-032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BEATTY, MARK S.
931 E. OCEAN BLVD.
STUART FL 34994

10. Name and Address of New Registered Agent

81. Name FL	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 the 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 607.0508, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
101. NAME BEATTY, MARK S. STREET ADDRESS 931 E. OCEAN BLVD. CITY ST ZIP STUART FL	11. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 13. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 14. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
102. NAME STREET ADDRESS CITY ST ZIP	21. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 23. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 24. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
103. NAME STREET ADDRESS CITY ST ZIP	31. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 33. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 34. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
104. NAME STREET ADDRESS CITY ST ZIP	41. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 43. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 44. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
105. NAME STREET ADDRESS CITY ST ZIP	51. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 53. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 54. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
106. NAME STREET ADDRESS CITY ST ZIP	61. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 63. STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition 64. CITY ST ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I do hereby certify that the information supplied with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119(7)(b), 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 and under oath. That I am an officer or director of the corporation or the trustee or holder empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 changes from an old agent with all address.

SIGNATURE:

MARK S. BEATTY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAL OR DIRECTOR

2-9-95 407-257-4553
Filing Date