

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jun 21 1996 8:00 am
Secretary of State

DOCUMENT # 600701 (7)

1. Corporation Name

MOLINA, BURKETT, CHAUHAN, WHEELLEY AND FINK, M.D.
, P.A.



Principal Place of Business

2345 14TH AVENUE, SUITE B
VERO BEACH FL 32960

Mailing Address

2345 14TH AVENUE, SUITE B
VERO BEACH FL 32960

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/23/1968

3a. Date of Last Report

06/16/1995

4. FEI Number

59-1225753

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ 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 in Block 12

Signature typed or printed name of registered agent in Block 13

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

MOLINA, VINCENT J

STREET ADDRESS

2345 14TH AVE

CITY-ST-ZIP

VERO BCH, FL 00000

TITLE

D

☐ DELETE

NAME

CHAUHAN, HEMINDRA

STREET ADDRESS

2345 14TH AVENUE

CITY-ST-ZIP

VERO BCH, FL 00000

TITLE

D

☐ DELETE

NAME

WHEELLEY, MARTHA

STREET ADDRESS

2345 14TH AVE

CITY-ST-ZIP

VERO BCH, FL 00000

TITLE

PD

☐ DELETE

NAME

BURKETT, LEO

STREET ADDRESS

2345 14TH AVENUE

CITY-ST-ZIP

VERO BEACH FL

TITLE

D

☐ DELETE

NAME

FINK, WARREN

STREET ADDRESS

2345 14TH AVE

CITY-ST-ZIP

VERO BCH FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leo A. Burkett, M.D.

Date

Daytime Phone #

CR2E034 (12/95)