

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 29, 1996 08:00 AM
Secretary of State

DOCUMENT # **600747** (0)

1. Corporation Name

GOLD, VANN & WHITE, P.A.

Principal Place of Business

**2300-5TH AVENUE
VERO BCH FL 32960**

Mailing Address

**2300-5TH AVENUE
VERO BCH FL 32960**

3. Date Incorporated or Qualified
12/30/1968

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

4. FEI Number
59-1234929

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

**MERRILL, L. KENT, M.D.
2300 FIFTH AVE
VERO BCH FL 32960**

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 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the date of filing

Signature typed or printed name of registered agent and the date of filing

(Date)

12. OFFICERS AND DIRECTORS

TITLE **VD** ☐ DELETE
NAME **HILL, JOSEPH A.**
STREET ADDRESS **2300-5TH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **PM** ☐ DELETE
NAME **MERRILL, L. KENT**
STREET ADDRESS **2300 FIFTH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **D** ☐ DELETE
NAME **ZIMMER, MICHAEL B.**
STREET ADDRESS **2300 FIFTH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **D** ☐ DELETE
NAME **GRAHAM, PAUL ABRAM**
STREET ADDRESS **2300 5TH AVENUE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **D** ☐ DELETE
NAME **GEIGER, RALPH, B**
STREET ADDRESS **2300 FIFTH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **SD** ☐ DELETE
NAME **GLASER, ARTHUR**
STREET ADDRESS **2300 FIFTH AVE**
CITY-ST-ZIP **VERO BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition

1.2 NAME **Lum, Katharine**
1.3 STREET ADDRESS **2300 5th Avenue**
1.4 CITY-ST-ZIP **Vero Beach, FL** ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

5.1 TITLE **VD** ☒ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

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)(h), 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: *Michael Zimmer-MD*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/96
(Date)

407-567-7111
Telephone Number

CR2E034 (12/95)