

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 601409 (6)  
1. Corporation Name  
CLARK & DAUGHTREY MEDICAL GROUP PROFESSIONAL ASSOCIATION

Principal Place of Business  
130 PABLO STREET  
P.O. BOX 2098  
LAKELAND FL 33806-9098

Mailing Address  
130 PABLO STREET  
P.O. BOX 2098  
LAKELAND FL 33806-9098

FILED  
Sep 17 1997 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/18/1969 3a. Date of Last Report 05/01/1996  
4. FEI Number 59-1273583 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 or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent

MELTON JR., JAMES D.  
130 PABLO STREET  
P.O. BOX 2098  
LAKELAND FL 33806-9098

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          | PO                   | DELETE |
| NAME           | BASS, SHELTON T.     |        |
| STREET ADDRESS | 130 PABLO ST         |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |
| TITLE          | VD                   | DELETE |
| NAME           | MELTON, JAMES D. JR. |        |
| STREET ADDRESS | 130 PABLO ST         |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |
| TITLE          | VD                   | DELETE |
| NAME           | LOPEZ, RAUL A.       |        |
| STREET ADDRESS | 130 PABLO ST         |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |
| TITLE          | VD                   | DELETE |
| NAME           | NAIMAN, RICHARD A.   |        |
| STREET ADDRESS | 130 PABLO ST         |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |
| TITLE          | VD                   | DELETE |
| NAME           | CARRILLO, LUIS E.    |        |
| STREET ADDRESS | 130 PABLO ST         |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |
| TITLE          | VD                   | DELETE |
| NAME           | TRINDADE, ANTONIO    |        |
| STREET ADDRESS | 130 PABLO STREET     |        |
| CITY-ST-ZIP    | LAKELAND FL          |        |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                    |        |          |
|--------------------|--------------------|--------|----------|
| 1.1 TITLE          | D                  | Change | Addition |
| 1.2 NAME           |                    |        |          |
| 1.3 STREET ADDRESS |                    |        |          |
| 1.4 CITY-ST-ZIP    |                    |        |          |
| 2.1 TITLE          | TD                 | Change | Addition |
| 2.2 NAME           |                    |        |          |
| 2.3 STREET ADDRESS |                    |        |          |
| 2.4 CITY-ST-ZIP    |                    |        |          |
| 3.1 TITLE          | PD                 | Change | Addition |
| 3.2 NAME           | Evans, R. David    |        |          |
| 3.3 STREET ADDRESS | 130 Pablo Street   |        |          |
| 3.4 CITY-ST-ZIP    | Lakeland, FL 33806 |        |          |
| 4.1 TITLE          |                    | Change | Addition |
| 4.2 NAME           |                    |        |          |
| 4.3 STREET ADDRESS |                    |        |          |
| 4.4 CITY-ST-ZIP    |                    |        |          |
| 5.1 TITLE          | SD                 | Change | Addition |
| 5.2 NAME           | Malzone, William F |        |          |
| 5.3 STREET ADDRESS | 130 Pablo Street   |        |          |
| 5.4 CITY-ST-ZIP    | Lakeland, FL 33806 |        |          |
| 6.1 TITLE          | D                  | Change | Addition |
| 6.2 NAME           |                    |        |          |
| 6.3 STREET ADDRESS |                    |        |          |
| 6.4 CITY-ST-ZIP    |                    |        |          |

14. I do 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 addendum.

SIGNATURE:

CR2E034 (4/97)

**Clark & Daughtrey Medical Group, P.A.**  
**1997 Profit Corporation Annual Report**  
**Additons to Block 12 - Officers & Directors**

#601409

(1) D  
Tallo, Raul B.  
130 Pablo Street  
Lakeland, FL 33803

(2) D  
Garriga, Alex  
130 Pablo Street  
Lakeland, FL 33803

(3) D  
Owen, Phillip  
130 Pablo Street  
Lakeland, FL 33803