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Apr 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 601918 (6)

1. Corporation Name

COPENHAVER, BELL & ASSOCIATES, M.D.'S, P.A.

Principal Place of Business

1421 COURT STREET, STE. A
P.O. BOX 6230
CLEARWATER FL 34616
US

Mailing Address

1421 COURT STREET, STE. A
P.O. BOX 6230
CLEARWATER FL 34616-6172
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

01/30/1970

3a. Date of Last Report

03/18/1996

4. FEI Number

59-1317432

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

COPENHAVER, ROGER D
1421 COURT ST., SUITE A
CLEARWATER FL 34616

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 ☐ DELETE

NAME P BELL JOHN
STREET ADDRESS 1421 COURT ST., STE. A
CITY-ST-ZIP CLEARWATER FL

TITLE ☒ DELETE

NAME V COPENHAVER, ROGER
STREET ADDRESS 1421 COURT ST., STE. A
CITY-ST-ZIP CLEARWATER FL

TITLE ☒ DELETE

NAME S PIDALA, FRANK
STREET ADDRESS 1421 COURT ST., STE. A
CITY-ST-ZIP CLEARWATER FL

TITLE ☒ DELETE

NAME T MEADOWS, TERRY R.
STREET ADDRESS 1421 COURT ST., STE. A
CITY-ST-ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME V, D William F. Miller, III
2.3 STREET ADDRESS 1717 Main Street, Suite 5200
2.4 CITY-ST-ZIP Dallas, TX 75201-7365

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME S Robert F. Anderson II
3.3 STREET ADDRESS 1717 Main Street, Suite 5200
3.4 CITY-ST-ZIP Dallas, TX 75201-7365

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME T Robert F. Anderson II
4.3 STREET ADDRESS 1717 Main Street, Suite 5200
4.4 CITY-ST-ZIP Dallas, TX 75201-7365

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME D Leonard M. Riggs, Jr., MD
5.3 STREET ADDRESS 1717 Main Street, Suite 5200
5.4 CITY-ST-ZIP Dallas, TX 75201-7365

6.1 TITLE ☐ 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 address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert F. Anderson II (214) 712-2000

Date

Daytime Phone #

CR2E034 (9/96)