## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

Suite, Apt. #, etc.

DOCUMENT # 601918

(6)

COPENHAVER, BELL & ASSOCIATES, M.D.'S, INC.

Principal Place of Business

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

2. Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

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

TER FL 34616 DO NOT WRIT.

3. Date Incorporated or Qualified

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

01/30/1970

59-1317432

5. Certificate of Status Desired

4. FEI Number

City & State    City & State   City & City & State   City & State	22		[27]				Fee Required	
Zip	<u></u>	te	- ,	<b>-</b> '''			6. Election Campaign Financing \$5.00 May Be	
28   29   30								
9. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  83  Street Address (P.O. Box Number is Not Acceptable)  84  City  FL  85  Street Address (P.O. Box Number is Not Acceptable)  85  Street Address (P.O. Box Number is Not Acceptable)  86  City  FL  87  Street Address (P.O. Box Number is Not Acceptable)  87  Street Address (P.O. Box Number is Not Acceptable)  88  Street Address (P.O. Box Number is Not Acceptable)  89  City  FL  80  Street Address (P.O. Box Number is Not Acceptable)  81  Street Address (P.O. Box Number is Not Acceptable)  82  Street Address (P.O. Box Number is Not Acceptable)  83  City  FL  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  85  City  Fl  85  City  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  85  City  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  85  City  Fl  Sirrett Address (P.O. Box Number is Not Acceptable)  Fl  Sirrett Address (P.O. Box Number is Not Accept		<b>⊢</b> ′	<b>⊢</b> '		ntry			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  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, and accept the obligations of Josephson Provision's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Josephson Provision's board of directors. I hereby accept the appointment as registered agent and tentile with, and accept the obligations of Josephson Provision's board of directors. I hereby accept the appointment as registered agent and tentiles.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  P	24			30				
TALLAHASSEE FL 32301    Section								
TALLAHASSEE FL 32301    20	1201 HAYS STREET				01	Name		
Bas					82 Street Address (P.O. Box Number is Not Acceptable)			
State   Part								
TILE P DELETE 1.1 TITLE P DELETE 1.1 TITLE DELETE 1.1 TITLE VD DELETE 1.1 TITLE VD DELETE 1.1 TITLE VD DELETE 1.1 TITLE ST DALAS TX DELETE 3.1 TITLE ST DALAS TX DALLAS TX					83			
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 agent, and table of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.    Signature   Si				•	84	City	85 Zip Code	
Dillice or registered agent. I am familiar with, and accept the obligations of, Section 807.505, Florida Statutor  SIGNATURE  12.							<b>►L</b>	
Agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    12.	11. Pursuant	to the provisions of Sections 607,0502 registered agent, or both, in the State (	! and 607.1508, Florida Si of Florida, Such change v	tatutes, the ab	ove thy	named o	corporation submits this statement for the purpose of changing its registered	
Signature, typed or printed regine and life if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	agent. I a	am familiar with, and accept the obliga	tions of, Section 607.050!	5, Florida Stati	utes	ine corb	orations board or directors. Thereby accept the appointment as registered	
Signature, typed or printed reeme of registered agent and life if applicable.   INOTE: Registered Agent signature required when reinstating)   DATE	SIGNATURE							
DELETE				(NOTE: Registered	Agei	nt signature r	equired when reinstating) DATE	
NAME							ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
STREET ADDRESS   1421 COURT ST., STE. A   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP		ļ .	∐ DELETE	1.1 111	LE		Change Addition	
CITY-ST-ZIP	NAME			1.2 NA	ME			
TITLE	STREET ADORESS			1.3 ST	REET,	ADDRESS		
MILLER, WILLIAM F III	CITY-ST-ZIP				Y- ST	-ZIP		
STREET ADDRESS   1717 MAIN ST, 5200   2.3 STREET ADDRESS   DALAS TX   2.4 CITY-ST-ZIP	TITLE	VD	☐ DELETE	2.1 TH	LE		ST Change XXAddition	
City-St-ZiP	NAME	MILLER, WILLIAM F III		2,2 NA	ME	j		
TITLE	STREET ADDRESS	1717 MAIN ST, 5200		2.3 ST	REET /	ADDRESS		
NAME	CITY-ST-ZIP	DALAS TX	3.7	2. 4 CI	TY - S	r-23P		
STREET ADDRESS   1717 MAIN ST, 5200   33 STREET ADDRESS   DALLAS TX   3.4. CITY-ST-ZIP	TITLE	ST	DELETE	3.1 TIT	LE		Change Addition	
CITY-ST-ZIP	NAME	ANDERSON, ROBERT F II		3.2 NAI	ME		· —	
TITLE         D         DELETE         4.1 TITLE         Change         Addition           NAME         RIGGS, LEONARD M JR         4.2 NAME           STREET ADDRESS         1717 MAIN ST, 5200         4.3 STREET ADDRESS           CITY-ST-ZIP         DALLAS TX         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME         Addition	STREET ADDRESS	1717 MAIN ST, 5200		3.3 STF	REET A	ADDRESS		
TITLE         D         DELETE         4.1 TITLE         Change         Addition           NAME         RIGGS, LEONARD M JR         4.2 NAME           STREET ADDRESS         1717 MAIN ST, 5200         4.3 STREET ADDRESS           CITY-ST-ZIP         DALLAS TX         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME         Change         Addition	CITY-ST-ZIP	DALLAS TX		3.4. CI	Y-S1	i-ZIP		
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STREET ADDRESS   1717 MAIN ST, 5200	NAME	RIGGS, LEONARD M JR		4. 2 NA	ME	1		
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•••••••••••••••••••••••••••••••••••••			المال المال				Change Addition	
	NAME			6.2 3266	ec.			

14. I hereby certify that the information supplied with this filling 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 perfect of 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 type the chapter 607 in the perfect of the corporation of the perfect of the perfec

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

EEQUINTILIAM F. Miller, III

1/23/98

(214) 712-2000

CR2E034 (10/97)

Applied For

\$8.75 Additional

Not Applicable