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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 602055 (6)

1. Corporation Name
**MID-FLORIDA UROLOGICAL ASSOCIATES, P.A., DRS. CO
TO, CASCARDO & DONAHUE**

Principal Place of Business RS. COTO & CASCARDO 1616 WOODWARD STREET ORLANDO FL 32803	Mailing Address RS. COTO & CASCARDO 1616 WOODWARD STREET ORLANDO FL 32803
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21. State Apt. # etc. 22. City & State 23. City & State 24. City & State	25. Mailing Address 26. State Apt. # etc. 27. City & State 28. City & State 29. City & State	3. Date Incorporated or Qualified 04/28/1970	3a. Date of Last Report 05/01/1994	4. FEI Number 06-0128200-59-1252555	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	
		7. Fees (Applicable fees only for companies tax under 170-022 Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent COTO, MANUEL J 1616 WOODWARD ST. ORLANDO FL 32803		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 605, 606, and 607, 190F, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent as shown on the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the provisions of Sections 605, 606, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
12a. NAME 12b. STREET ADDRESS 12c. CITY & STATE	12d. NAME 12e. STREET ADDRESS 12f. CITY & STATE	13a. NAME 13b. STREET ADDRESS 13c. CITY & STATE	13d. NAME 13e. STREET ADDRESS 13f. CITY & STATE
PD COTO, MANUEL J 5714 TARAWOOD DRIVE ORLANDO, FL 00000	TS CASCARDO, SERGIO 1616 WOODWARD ST ORLANDO, FL 00000		
D DONAHUE, DENNIS J. 1616 WOODWARD ST. ORLANDO FL	VP ELLIS, GEORGE 1616 WOODWARD ST ORLANDO FL		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 170-022, Florida Statutes. I further certify that the information indicated in this annual report on biennially annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am available on demand for the corporation or the removal of liability empowered to receive this report on required by Chapter 605, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report with my address.

SIGNATURE: _____
SIGNATURE AND TYPE OF OFFICER OR DIRECTOR

5-16-95