FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Mar 20, 1996 08:00 AM
Secretary of State

DOCUMENT # 602712 (2)

1. Corporation Name

DRS. ORR, BRAUKMAN & RAUCHWAY, P.A.

Principal Place of Business	Mailing Address
1201 5TH AVE NO SUITE 509 ST PETERSBURG FL 33705	1201 5TH AVE NO SUITE 509 ST PETERSBURG FL 33705

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

3. Date Incorporated or Qualified: **03/04/1971**
3a. Date of Last Report: **02/28/1995**

4. FEI Number: **59-1316491** ☐ 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

RAUCHWAY, MICHAEL I.
~~8047 12TH AVE SO~~ 3216 C EL CENTRO
ST PETERSBURG, FL ST PETERSBURG BEACH
33707 FL 33706

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 _____ Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	VD	☐ Change ☒ Addition
NAME	RAUCHWAY, MICHAEL		1.2 NAME	David E. Nunnelly	
STREET ADDRESS	~~8047 12TH AVE S~~ 3216 C EL Centro		1.3 STREET ADDRESS	5963 Bayview Circle So.	
CITY-ST-ZIP	ST PETERSBURG, FL ~~00000~~ 33706		1.4 CITY-ST-ZIP	St. Petersburg, 33707	
TITLE	VD	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRAUKMAN, ERNEST		2.2 NAME		
STREET ADDRESS	106 29TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG, FL 00000		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ORR, REX		3.2 NAME		
STREET ADDRESS	117 BAY POINT DRIVE NE		3.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG, FL ~~00000~~ 33704		3.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	EGAN, THOS.		4.2 NAME		
STREET ADDRESS	2250 MERMAID PT. NE		4.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33703		4.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SCHIRM, STEVEN		5.2 NAME		
STREET ADDRESS	14529 FEATHERSOUND DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34622		5.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	DEGESYS, GINTARAS		6.2 NAME		
STREET ADDRESS	~~926 SNELL 1ST BLVD. NE~~ #5 Bridgewaters Cir.		6.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33704		6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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 attached sheet, with an address.

SIGNATURE: X _____ (813) 821-1328
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Michael E. Rauchway, M.D.