FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

AM 1:40

TALLAHASSEE, FLORIDA

DOCUMENT # 603367 (4)

OBSTETRICAL & GYNECOLOGICAL ASSOCIATES, P.A.

3627 UNIVERSITY BLVD.. SOUTH SUITE 340 JACKSONVILLE FL 32216	3627 UNIVERSITY BLVD.. SOUTH SUITE 340 JACKSONVILLE FL 32216

3. Date of Incorporation: 02/09/1972

3a. Date of Last Report: 07/06/1994

4. FEI Number: 59-1374849 — 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/had elected to be taxed under S 1372 of the Internal Revenue Code: Yes ☒ No ☐

9. Name and Address of Current Registered Agent

PLATOCK, GERALD M
3627 UNIVERSITY BLVD., SOUTH
SUITE 340
JACKSONVILLE FL 32216

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 Section 607.1505, 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. The 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 that position.

SIGNATURE: X

12. OFFICER AND DIRECTOR	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
P SUHRER, J. STEPHEN 3627 UNIVERSITY BLVD., S., SUITE 340 JACKSONVILLE FL 32216	☐ Change ☒ Addition Hormoz Khosravi, M.D. 3627 Univ. Blvd S, Ste 340 Jax, Fl 32216
VP PLATOCK, GERALD M. 3627 UNIVERSTIY BLVD., S., SUITE 340 JACKSONVILLE FL 32216	☐ Change ☐ Addition
D CHRISTIAN, SAMUEL A. 3627 UNIVERSITY BLVD., S., SUITE 340 JACKSONVILLE FL 32216	DELETE AS OF 7/1/95 ☐ Change ☐ Addition
ST ANDRES, FRANK J. 3627 UNIVERISYT BLVD., S., SUITE 340 JACKSONVILLE FL 32216	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. To the best of my knowledge and belief, the facts stated in this report are true. I am aware that false information submitted in a document to the Department of State pursuant to Chapter 607, Florida Statutes, constitutes a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida Statutes.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 398-1202

0018316 CP