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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

J. FRED MILLER, III, M.D., P.A.

FILED									
Apr 27 1998 8:00am									
Secretary of State									

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Dringing Diag	a of Dunia and	MA-III - A A A A								
Principal Place of Business Mailing Address									0,0,,	
600 NOKOMIS AVENUE SOUTH 600 NOKOMIS AVENUE SOUTH P.O. DRAWER 2047 P.O. DRAWER 2047										
VENICE FL 3	·	VENICE FL 34284-8047			1	DO NOT WRITE IN THIS SPACE				
		V2.002 12 01207 0017			-	3. Date incorporated or Qualified				
						09/22/1972				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		I IA	pplied For	
21		26			i	59-1412653			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							Additional	
22		27				5. Certificate of Status Desired			equired	
City & State	6	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip Co				8. This corporation owes or has paid the current year Intangible				
24	25		30			Personal Property Tax due June] No	
	9. Name and Address of Currer	81		-	10. Name and Address of New R	egistered A	lgent			
	MILLER, J FRED III				Name					
600		82	2 S	Street Address	(P.O. Box Number is Not Accepta	ble)				
VEI	NICE FL 33595		_							
				3						
			84	6 C	City			85 Zip	Code	
11 Pursuant	to the provisions of Postions 607.050	20 and 207 \$500 Florida Ctat. to					<u>FL</u>	<u> </u>		
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, based or printed name of registered age	AIOTE	Popistand As		ignature required wi		DATE			
12,		D DIRECTORS	13.	JOI IL BY	griatore required wi	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12	
TITLE	P	DELETE	1.1 TITLE		1	1133113113113131313131313131313131313131		Change	Addition	
NAME	MILLER, J FRED, III		1.2 NAME		Ì		,			
STREET ADDRESS	444 MAIANA MATA		1.3 STREE	1.3 STREET ADDRESS						
CITY-ST-ZIP	VENICE FL			ST- Z)	1					
TITLE			2.1 TITLE					Change	Addition	
NAME	MILLER, FRED J 111		2.2 NAME					•		
STREET ADDRESS	600 NOKOMIS AVENUE, A		2.3 STREE	T ADD	DRESS					
CITY-ST-ZIP	VENICE FL		2.4 CITY-	-ST-Z	ZIP .					
TITLE	DELETE 31			1				Change	Addition	
NAME			3.2 NAME				•			
STREET ADDRESS			3.3 STREE	T ADD	DAESS					
CITY-ST-ZIP			3.4. CITY-	ST-ZI	ne					
TITLE			4.1 TITLE					Change	Addition	
NAME			4. 2 NAME	:						
STREET ADDRESS			4.3 STREE	T ADD)ress					
CITY-ST-ZIP			4.4 CITY-1	ST-ZIF	IP					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	T ADD	PRESS					
CITY-ST-ZWP			5.4 CITY-5	ST - ZIF	P					
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME						ĺ	
STREET ADDRESS			6.3 STREET	T ADDI	RESS					
CITY-ST-ZIP			6.4 CITY-5						ļ	
	ertify that the information supplied w	ith this filing does not qualify for				tion 110 07/2\/i) Florida Ctatutas I	f	4:4 . 4b a 4b a	lada assatia a	

Indicated on this annual report or 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 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 or the attachment with an address.

SIGNATURE: