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PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

603979

(6)

|  | LES R. DEAL, M.D., P.A   | <b>4</b> .   |  |  |  |  |  |                                     |
|--|--|--|--|--|--|--|--|-------------------------------------|
| Principal Place of Business Mailing Address  |  |  |  |  |  | IJ <b>a 18</b> 111 1 <b>88</b> 18 1811 811 | III BABA BIDI DI                       | DII UIOLI BIDIL KUD                 |
| 2606 CLINE<br>TALLAHASS  | STREET<br>SEE FL 32312   |  | 2606 CLINE STREET<br>TALLAHASSEE FL 32312  |  |  |  |  |                                     |
|  |  |  |  |  | 3. Date incorporated or Qu<br>12/07/1972       | ualified 3a. Da                            | ate of Last R<br>02/22/1               | •                                   |
| . Principal Plac   | be of Business   | 2a. Mailing Address  |  |  | 4. FEI Number                                  |  |  | Applied For                         |
| <u> </u>   |  | 26   |  |  | 59-1427432                                     |  |  | Not Applicable                      |
| Suite, Apl. #,   | , ette.  | Suite. Apt. #, etc   | }.   |  | 5. Certificate of Status Dec                   | sired 🔲                                    |  | Additional<br>Required              |
| Orty & State   |  | City & State   |  |  | 6. Election Campaign Fina                      |  |  | 0 May Be                            |
|  |  | 28   | <del> </del>   |  | Trust Fund Contribution                        |  |  | d to Fees                           |
| Zip  | Gountry 25   | Ζφ<br><b>29</b>  | Count<br>30  | ry   | This corporation has liab     Florida Statutes | oility for intangible                      | tax under s                            | 199.032,                            |
|  | 9. Name and Address of Cur   |  |  | ······································   | 10. Name and Address of                        |  | d Agent                                |                                     |
|  |  |  | 8  | 1 Name   |  |  |  |                                     |
| DEAL.  | CHARLES R.   |  | 8  | 2 Street Add   | ress (P.O. Box Number is Not A                 | contable)                                  |  |                                     |
| 2606 CLINE STREET<br>TALLAHASSEE FL 32312  |  |  |  | 2 Street Addr  | 1655 IF TO BOX HOLLOO IS HOLD                  | ссергавној                                 |  |                                     |
|  |  |  | 6  | 3  |  |  |  |                                     |
|  |  |  | 8  | 4 City   |  | F  | 85 Z4                                  | Code                                |
| . Pursuant to  | the previsions of Sections 607.0   | 0502 and 607.1508, Florida St.                                   | atutes, the above  | named corpor   | ration submits this statement for              | r the nurnose of c                         | changing its r                         | egistered offic                     |
| or registered<br>familiar with   | d agent, or both, in the State of F<br>i, and accept the obligations of, S | ilorida. Such change was auth<br>Section 607.0505, Florida Stati | ionzed by the col<br>utes.   | rporation's boa  | rd of directors. I hereby accept               | the appointment                            | as registered                          | agent. I am                         |
|  |  |  |  |  |  |  |  |                                     |
| CINATURE   |  |  |  |  |  |  |  |                                     |
| GNATUREs   | grunne, typer, or pented name of registered a                              |  | (NOTE Registere LA)  | gent signature require   | d where renstatings                            | DATE                                       |  |                                     |
|  | OFFICERS.  | AND DIRECTORS  | 13.  |  | d when renstating) ADDITIONS/CHANGES           |  | ND DIRECTO                             |                                     |
|  | OFFICERS<br>PD   |  | 13.<br>1 1 TITL  | E  |  |  |  | RS IN 12                            |
| S:   | OFFICERS PD DEAL, CHARLES R.   | AND DIRECTORS  | 13.<br>1 1 TITL<br>12 NAM  | E E  |  |  | ND DIRECTO                             |                                     |
| E E E L'ADORESS  | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  | 13.<br>1 1 IIIL<br>12 NAM<br>13 STRE   | E<br>E<br>E1 ADDRESS   |  |  | ND DIRECTO                             |                                     |
| E<br>E<br>+1 ADORESS<br>-S1-7/P  | OFFICERS PD DEAL, CHARLES R.   | AND DIRECTORS  | 13.<br>1 1 TITL<br>1 2 NAM<br>1 3 STRE<br>1 4 CITY   | E<br>E<br>E1 ADDRESS<br>-SI-ZIP  |  |  | ND DIRECTO Change                      | Addition                            |
| SI<br>F<br>F<br>FLADORESS<br>- SI-ZIP  | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  | 13.<br>1 1 TITL<br>12 NAM<br>13 STRE<br>14 CITY<br>2 1 TITL  | E<br>E<br>E1 ADDRESS<br>-ST-ZIP<br>E   |  |  | ND DIRECTO                             |                                     |
| E<br>E<br>E ELADORESS<br>- ST-ZIP<br>E   | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  | 13.<br>1 1 TITL<br>12 NAM<br>13 STRE<br>14 CITY<br>2 1 TITL<br>22 NAM  | E<br>E! ADDRESS<br>- SI - ZIP<br>E   |  |  | ND DIRECTO Change                      | Addition                            |
| SI ADORESS SI ZIP  | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  | 13. 1 1 TITL 12 NAM 13 STRE 14 CITY 2 1 TITL 22 NAM 23 STRE  | E E E ADDRESS -ST-ZIP E E E ADDRESS  |  |  | ND DIRECTO Change                      | Addition                            |
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| E AC EFF ADDRESS IN STATE FOR A COMPANY AND A COMPANY A  | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  | 13. 1 1 TITL 12 NAM 13 STRE 14 CITY 2 1 TITL 22 NAM 23 STRE  | E E I ADDRESS -SI-ZIP E E FI ADDRESS -SI-ZIP E   |  |  | ND DIRECTO Change                      | Addition                            |
| F At   | OFFICERS<br>PD<br>DEAL, CHARLES R.<br>2606 CLINE STREET                    | AND DIRECTORS  DELETE  DELETE                                    | 13. 1 1 TITL 12 NAM 13 STRE 14 CITY 2 1 TITL 22 NAM 23 STRE 24 CITY 3 1 TITL 32 NAM  | E E I ADDRESS -SI-ZIP E E FI ADDRESS -SI-ZIP E   |  |  | ND DIRECTO Change Change               | Addition Addition                   |
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SIGNATURE: Charles P. Deal M.D. Provident 2/39/96 904-385-0/44

SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING SPICER OR DIRECTOR

Date

Da