| | PROFIT RPORATION UAL REPORT 1996 | | Sand Secr | PARTMENT OF STATE ra B. Mortham etary of State DF CORPORATIONS | | | |
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| OCU Corporation | MENT # 6 | 04167 | (7) | | | | |
| DAVID | D. WHITAKER D. | M.D. PA | | | £ 184114 \$1211 \$0111 \$144 \$144 \$1 | 1((188) 8(8)) 8(8) 8(8) 8(8) | id Billit 2400 (840 |
| rincipa! Place | e of Business | - | Mailing Address | | | | |
| | AVE. NE #1102 BURG FL 33701-0907 | | 111 SECOND AVE. NE ST. PETERSBURG FL | | | | |
| | | | | | Date Incorporated or Qualified 02/09/1973 | 3a. Date of Last 03/20/19 | • |
| Principal Pl | lace of Business | 2 | 2a. Mailing Address | | 4. FEI Number 59-1439606 | 00/20/10 | Applied For |
| Suite, Apt. | #, elc. | 2 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | 1 1 | Not Applicable 5 Additional |
| City & State | 9 | 2 | City & State | | 6. Election Campaign Financing | □ \$5.0 | Required May Be |
| Ζιρ | Counti | ry | Zip | Country | Trust Fund Contribution 8. This corporation has liability for | or intangible tax under | ed to Fees s 199.032, |
| | 9. Name and Addre | 25 ess of Current Reg | | 81 Name | Florida Statutes Ye 10. Name and Address of New | Registered Agent | |
| 111 2ND ST PETEL 33701 | ER, DAVID D. DMD, I AVE NE STE 1102 RSBURG, FL to the provisions of Sected agent, or both, in the | ions 607,0502 and b | 507.1508, Flonda Statu ich chande was authori | 83 84 City tes, the above named corpo | ration submits this statement for the part of directors. I hereby accept the an | FL 85 2 | registered office |
| 111 2ND ST PETEI 33701 Pursuant t or registers familiar wit | AVE NE STE 1102 RSBURG, FL To the provisions of Section and accept the obligation and accept the obligation of pointed name | ions 607.0502 and I State of Florida Sc ations of, Section 60 | 17.0505, Florida Statute | 83 84 City tes, the above-named corpo zed by the corporation's boals. OTE: Registered Agent signature require | ration submits this statement for the prior of directors. I hereby accept the ap- | FL 85 Z urpose of changing its pointment as registere | registered office d agent. I am |
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