



FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 28 1997 8:00am Secretary of State	
DOCUMENT # 604486 (1) 1. Corporation Name WHITE, C. RONALD, M.D., P.A.							
Principal Place of Business 1801-16TH STREET NORTH SUITE A ST. PETERSBURG FL 33704 US				Mailing Address 536 16TH AVE NE ST. PETERSBURG FL 33704-4717 US		3. Date Incorporated or Qualified 07/01/1973	
2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip Country 24				2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip Country 29		3a. Date of Last Report 05/01/1996	
				4. FEI Number 59-1467578		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 WHITE, C. RONALD 536 16 AVE NE ST PETERSBURG FL 33704				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE PDY NAME WHITE, C. RONALD STREET ADDRESS 536 - 16TH AVE NE CITY - ST - ZIP ST PETERSBURG FL				1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			
TITLE S NAME WHITE, STEPHEN A. STREET ADDRESS 536 - 16TH AVE NE CITY - ST - ZIP ST PETERBURG FL				2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP			
14. I do hereby certify that the information supplied with this filing 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 attachment with an address							
SIGNATURE: C. RONALD WHITE				4/24/97 (813) 894-4077			