FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 17 PM 11:42

DOCUMENT # 604620 **(5)**

1. Corporation Name
JOHN A. NEILY, D.O., P.A.

Principal Place of Business	Mailing Address
5975 W. SUNRISE BLVD. FT. LAUDERDALE FL 33313	5975 W. SUNRISE BLVD. FT. LAUDERDALE FL 33313

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/25/1973
3a. Date of Last Report: 03/29/1994

2. Principal Place of Business
21 7316 SW 9th Court
22 Suite, Apt. #, etc.
23 City & State: Plantation Fl.
24 Zip: 33317
25 Country: USA.

2a. Mailing Address
26 7316 SW 9th Court
27 Suite, Apt. #, etc.
28 City & State: Plantation, Fl.
29 Zip: 33317
30 Country: USA

4. FEI Number: 59-1477921 ☐ 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

NEILY, JOHN A.
5975 W. SUNRISE BLVD.
FT. LAUDERDALE FL

10. Name and Address of New Registered Agent

81 Name: Neily, JOHN A.
82 Street Address (P.O. Box Number is Not Acceptable): 7316 SW 9th Court
83
84 City: Plantation FL 85 Zip Code: 33317

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	NEILY, JOHN A.	1.2 NAME	Neily, John A.	
STREET ADDRESS	5975 W. SUNRISE BLVD.	1.3 STREET ADDRESS	7316 SW 9th Court	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Plantation, Fl. 33317	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	NEILY, MARJORIE	2.2 NAME	Neily, Marjorie	
STREET ADDRESS	5975 W. SUNRISE BLVD	2.3 STREET ADDRESS	7316 SW 9th Court	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	Plantation, Fl. 33317	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: John A. Neily 4-12-95 305 584-5050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0021702 CP