FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

-APPROVED AND FILED

95 MAY 19 AM 10:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **604707** **(0)**

I.B. PRICE, M.D., P.A.

Principal Place of Business:
300 E. JEFFERSON ST
QUINCY FL 32351
US

Mailing Address:
300 E. JEFFERSON ST
QUINCY FL 32351
US

3. Date Incorporated or Qualified: 10/01/1973
3a. Date of Last Report: 08/05/1994
4. FEI Number: 59-1485084 — 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. The corporation has liability for intangible tax under s. 199.032, Florida Statutes. Yes / No

9. **Name and Address of Current Registered Agent**

PRICE, I.B. M.D.
300 E JEFFERSON ST
QUINCY FL 32351

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. [illegible]

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	
TITLE	P
NAME	PRICE, I.B., M.D.
STREET ADDRESS	300 E JEFFERSON ST
CITY-ST-ZIP	QUINCY FL
TITLE	S
NAME	WOODWARD, PAT M.
STREET ADDRESS	373 E JEFFERSON ST
CITY-ST-ZIP	QUINCY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. [illegible]

SIGNATURE: I B Price — 5/12/95 — 627-9161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0029737 CP

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

DOCUMENT # 605102 (3)

1. Corporation Name
OVIDIO E. VITAS, M.D., P.A.

Principal Place of Business
1257 FLORIDA AVE.
ROCKLEDGE FL 32955

Mailing Address
1257 FLORIDA AVE.
ROCKLEDGE FL 32955

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/04/1974
3a. Date of Last Report: 01/26/1994
4. FEI Number: 59-1519277 — 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. The corporation has liability for intangible tax under s. 199.052, Florida Statutes [ ] Yes [ ] No

2. Principal Place of Business
2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip / Country

9. Name and Address of Current Registered Agent

VITAS, (OVIDIO E.)
1257 FLORIDA AVE.
ROCKLEDGE FL 32955

10. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City: FL — Zip Code

11. [illegible]

SIGNATURE

12. DIRECTORS/OFFICERS

Title	Name / Address
PD	VITAS, (OVIDIO E.) 830 CARAMBOLA DRIVE MERRITT ISLAND FL
SD	VITAS, OVIDIO E. 1257 FLORIDA AVE. ROCKLEDGE FL
D	AGRAMA, HANI 1257 FLORIDA AVE. ROCKLEDGE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. [illegible]

SIGNATURE: [signature] 5/15/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OVID E. VITAS

0070726 CP