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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| . Corporation N   | MENT # 6250<br>Name  | ) <del>9</del> 1 (4  | <i>)</i>   |  |   |   |
|---|--|--|--|--|---|---|
| RALPH   | H.A. PARKS, M.D., P.A.   |  |  | 1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | <br>  | <br>                                      |
| rincipal Place o  | of Business  | Mailing Address  |  |  |   |   |
|   |  |  | ocet   |  |   |   |
| 1411 S 14TH<br>STE D  | ח פואבנו   | 1411 S 14TH STI<br>Ste D   | חבכו   |  |   |   |
|   | A BCH FL 32034   | FERNANDINA BO  | H FL 32034   | 3. Date Incorporated or Qualified  | 3a. Date of Last Re                                 | port                                      |
| US  |  | U\$  |  | 06/07/1979   | 05/01/1   | 995                                       |
| Principal Plac  | ce of Business   | 2a. Mailing Address  |  | 4. FEI Number 59-1916392   | <b>▶-</b>   | Applied For<br>Not Applicable             |
| Suite, Apt. #,  | , etc.   | Suite, Apt. #, etc.  |  | Certificate of Status Desired  | <b>□</b> \$8.75                                     | Additional                                |
| City & State  |  | City & State   |  | 6. Election Campaign Financing   | Fee I   | Required  May Be                          |
|   |  | 28   |  | Trust Fund Contribution  | L.J Adder   | to Fees                                   |
| Zip   | Country 25   | Zip<br><b>29</b>   | Gountry<br>30  | This corporation has liability for in Florida Statutes   |   | 199.032,                                  |
|   | 9. Name and Address of Cur   | and the contract of the contra | .,   | 10. Name and Address of New Ro   | egistered Agent                                     |   |
|   |  |  | 81 Name  |  |   |   |
|   | , RALPH A., M.D.   |  | 82 Street Add  | iress (P.O. Box Number is Not Acceptabl  | le)   | · · · · · · · · · · · · · · · · · · ·     |
|   | 60 14 STR  |  | 83   |  |   | ·   |
| STE D<br>FERNANDINA BCH FL 32034  |  |  | 04 03  |  | 05 70   | o Code                                    |
|   |  |  | <b>84</b> City   |  | FL 85 Zi  | Code                                      |
| or registere<br>familiar with   | o the provisions of Sections 607.0<br>ad agent, or both, in the State of F<br>n, and accept the obligations of, S  | lorida. Such change was autho  | orized by the corporation's boa  | oration submits this statement for the purp<br>and of directors. I hereby accept the appo  | pose of changing its r<br>pintment as registered    | egistered offic<br>agent. I am            |
| or registere<br>familiar with<br>IGNATURE _<br>s  | ed agent, or both, in the State of F<br>n, and accept the obligations of S<br>Signifier, types or printed harmoof is gestive a   | lorida. Such change was autho<br>Section 607.0505, Florida Statu   | orized by the corporation's boa  | ard of directors. Thereby accept the appo  | DATE  DATE  DATE  DEFENSION DIRECTO                 | ageni. I am<br>DRS IN 12                  |
| or registere<br>familiar with<br>GNATURE _<br>s<br>t.   | od agent, or both, in the State of Fin, and accept the obligations of, S<br>Signature, types or printed name of registeres a<br>OF HICE RS                                     | lorida. Such change was authosection 607.0505, Florida Statu<br>agertand till if a please  | orized by the corporation's boartes.   NOTE Registered Agord signature requirement   13.   | and of directors. Thereby accept the appointment of | DATE  | agent. i am                               |
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