FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 2:12

DOCUMENT # 680343 (1)

1. Corporate Name

OCALA NEURODIAGNOSTIC CENTER, P.A.

Principal Office Address
2203 SE THIRD AVE
SEVEN OAKS PROFESSIONAL PARK
OCALA FL 32671

Mailing Address
2203 SE THIRD AVE.
SEVEN OAKS PROFESSIONAL PARK
OCALA FL 32671

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/01/1980
3a. Date of Last Report: 04/20/1994

2. Prior Corporate Name
21
2a. Mailing Address
26

4. FEI Number: 59-2012132
Applied For
Not Applicable

Date Affiliated
22
Date Affiliated
27

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

City, State
23
City, State
28

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

24 City 25 State
29 Zip 30 Country

8. Has corporation been asked, for intangible tax under Chapter 199 Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NG, KEN
2203 SE THIRD AVE.
OCALA FL 34471

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 Section 607.0505 of the 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 and affirms that this corporation has authorized its Board of Directors to make such changes and affirms that it is complying with all statutes applicable to it in connection with such filing.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
NG, KEN
2203 SE THIRD AVE.
OCALA FL

D
HOWELL, GREGORY J.
2203 SE THIRD AVE.
OCALA FL

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

☐ Change ☐ Addition

REPORT FILED BY MAY 1

14. I hereby certify that the information supplied with this report is accurate and does not exceed, for the corporation stated in Section 1 of this document, the number of shares authorized by its articles of incorporation or amendments thereto, and that the signature appearing below is the signature of the president or vice president of the corporation or other officer or director authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document with an office listed with an address.

SIGNATURE: 5/1/95 904 732 7694
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0380065 CP