

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 694274

(2)

1. Corporation Name

CARDIOLOGY CONSULTANTS, INC.



Principal Place of Business

4800 N.W. 19TH PLACE
GAINESVILLE FL 32605

Mailing Address

4800 N.W. 19TH PLACE
GAINESVILLE FL 32605

2. Principal Place of Business

2a. Mailing Address

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State, Apt. #, etc.

State, Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

PEPINE, CARL J.
4800 NW 19TH PLACE
GAINESVILLE FL 32605

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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84 City

FL

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Zip Code

3. Date Incorporated or Qualified

07/13/1981

3a. Date of Last Report

04/03/1995

4. FEI Number

59-2106052

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Signature of the person authorized to file this report on behalf of the corporation

Signature of the Registered Agent

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

1. TITLE

DST
PEPINE, M LYNN
4800 NW 19TH PL
GAINESVILLE, FL 00000

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

PD
PEPINE, CARL J
4800 NW 19TH PL
GAINESVILLE, FL 00000

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6. NAME

7. STREET ADDRESS

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