

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996 3.15.96

B-2321

C

DOCUMENT # 766696 (9)

1. Corporation Name

GENESIS SUPPORT SYSTEMS, INC.



Principal Place of Business

Mailing Address

3627 UNIVERSITY BLVD. SOUTH
SUITE 840
JACKSONVILLE FL 32216

3627 UNIVERSITY BLVD. SOUTH
SUITE 840
JACKSONVILLE FL 32216

3. Date Incorporated or Qualified
01/19/1983

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEIGER, ALLAN T.
1301 RIVERPLACE BLVD. SUITE 1500
ROGERS, TOWERS, BAILEY, JONES & GAY
JACKSONVILLE FL 32207

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 Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC
NAME BROWN, J. BROOKS, M.D.
STREET ADDRESS 6998 SAN FERNANDO PLACE
CITY-STATE-ZIP JACKSONVILLE FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE D
NAME WILSON, NATHAN
STREET ADDRESS 51 CAT ROAD
CITY-STATE-ZIP PONTE VERDE BEACH FL 32082

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE DS
NAME FIELDS, ZACHARY R
STREET ADDRESS 4020 TURNBERRY COURT
CITY-STATE-ZIP JACKSONVILLE FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE DP
NAME CARROLL, DAVID W.
STREET ADDRESS 1207 SALT CREEK ISLAND
CITY-STATE-ZIP PONT VEDRA BEACH FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE V
NAME BAER, DOUGLAS M
STREET ADDRESS 2029 MARYE BRANT LOOP, N
CITY-STATE-ZIP NEPTUNE FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

D/V/S

D
Sneed, Gary W.
116 Carriage Lamp Way
Ponte Vedra Beach, FL 32082

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

904-391-1205

Daytime Phone #

CR2E037 (12/95)

766696

GENESIS SUPPORT SYSTEMS, INC.

The following is an addition:

Title: D

Busse, David H.

11 Spyglass Lane

Ponte Vedra Beach, FL 32082