2002 UNIFORM BUSINESS REPORT (UBR)

Mar 11, 2002 8:00 am Secretary of State **DOCUMENT # 770806** 1. Entity Name MID-FLORIDA MEDICAL SERVICES, INC. 03-11-2002 90053 032 ****61.25 Mailing Address Principal Place of Business %LANCE W. ANASTASIO %LANCE W. ANASTASIO 200 AVENUE F. NE 200 AVENUE F. NE WINTER HAVEN FL 33881-4131 WINTER HAVEN FL 33881-4131 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2486580 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) _ANASTASIO, LANCE W. 200 AVENUE F, NE WINTER HAVEN FL 33880 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE ☐ Delete SD TITLE DANTZLER, RICHARD NAME NAME STREET ADDRESS 860 W LAKE OTIS DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33880 X Addition CD Change X Delete TITLE CD TITLE TUCKER, LARRY NAME Bostick, Mark NAME STREET ADDRESS 169 Lake Otis Road, SE 17 LAKE ELOISE LANE SE STREET ADDRESS CITY-ST-ZIP Winter Haven, FL 33884 CITY-ST-ZIP WINTER HAVEN FL ☐ Addition Change VCD ☐ Delete TITLE TITLE MORROW, RONALD A NAME NAME STREET ADDRESS STREET ADDRESS 264 LAKE LINK DR, SE CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33884 Change ☐ Addition ☐ Delete TITLE WILLARD, EDGAR H III NAME NAME STREET ADDRESS STREET ADDRESS 1330 LAKE OTIS DRIVE, NORTH CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33880 X Change ☐ Addition ☐ Delete TITL F VCD TITLE MCPHERSON, CHARLES W NAME NAME STREET ADDRESS STREET ADDRESS 9 CYPRESS COVE ROAD SE CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33884 X Addition [Change ☐ Delete TITLE TD TITLE Richard Straughn 255 Magnolia Avenue, SW J.M. Nolen NAME NAME P.O. Box 1439 STREET ADDRESS STREET ADDRESS Winter Haven, FL 33880 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by papter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Winter Haven, FL 33882

Richard Dantzler 500

2/26/02

863-297-1899

Daytime Phone #

FILED

Allaskments Doc # Mid-Florida Medical Services Board of Directors

Name and Address	<u>Title</u>
Howard M. Beckert 1326 Lake Otis Drive, North Winter Haven, FL 3880	D
Ben R. Adams 1920 North Lake Howard Dr. Winter Haven, FL 33881	D
Donald E. Eason, M.D. 1119 Interlochen Blvd. Winter Haven, FL 33884	D
Lemuel L. Geathers 346 Avenue O, SW Winter Haven, FL 33880	D
G. Ellis Hunt P.O. Box 631 Lake Wales, FL 33859-0631	D
Paul S. Pierson, M.D. P.O. Box 832, Mountain Lake Lake Wales, FL 33859-0832	D
William C. Reynolds 50 Skidmore Winter Haven, FL 33884	D
Brian K. Swain P.O. Box 3096 Winter Haven, FL 33885	D
Seretha Tinsley 2705 Country Club Road, North Winter Haven, FL 33881	D
Peter S. Verrill, M.D. 305 Hamilton Shore Drive, NE Winter Haven, FL 33881	D
Norman White 3431 Harbor Beach Drive Lake Wales, FL 33859	D