

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F01758 (4)

1. Corporation Name
LAKELAND OB-GYN, P.A.



Principal Place of Business
1733 LAKELAND HILLS BLVD.
LAKELAND FL 33805
US

Mailing Address
1733 LAKELAND HILLS BLVD.
LAKELAND FL 33805
US

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

3. Date Incorporated or Qualified
10/01/1980

3a. Date of Last Report
02/03/1995

4. FEI Number
59-2026448

Applied For
Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

DUBOY, ALBERTO M
1733 LAKELAND HILLS BLVD.
LAKELAND FL 33805

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	DUBOY, ALBERTO M	1733 LAKELAND HILLS BL	LAKELAND FL	<input type="checkbox"/>
VP	ALVAREZ, PETER M	1733 LAKELAND HILLS BL.	LAKELAND FL	<input type="checkbox"/>
ST	PURETZ, JEFFREY L. M	1753 LAKELAND HILLS BLVD.	LAKELAND FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE	2. 1 TITLE	3. 1 TITLE	4. 1 TITLE	5. 1 TITLE	6. 1 TITLE
12 NAME	22 NAME	32 NAME	42 NAME	52 NAME	62 NAME
13 STREET ADDRESS	23 STREET ADDRESS	33 STREET ADDRESS	43 STREET ADDRESS	53 STREET ADDRESS	63 STREET ADDRESS
14 CITY - ST - ZIP	24 CITY - ST - ZIP	34 CITY - ST - ZIP	44 CITY - ST - ZIP	54 CITY - ST - ZIP	64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alberto Duboy, M.D. 31496 (941) 688-1528

CR2E034 (12/95)