

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:14

DOCUMENT # F50167 (8)

1. Corporation Name

RICHARD D. BARFIELD, M.D., P.A.

Principal Place of Business

% RICHARD D. BARFIELD, M.D.
JOHN F. KENNEDY MEMORIAL HOSPITAL
ATLANTIS FL

Mailing Address

% RICHARD D. BARFIELD, M.D.
JOHN F. KENNEDY MEMORIAL HOSPITAL
ATLANTIS FL

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/19/1981

3a. Date of Last Report

02/17/1994

4. FEI Number

59-2133590

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. 193.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 103 LIGHTHOUSE DR

2a. Mailing Address

26 103 LIGHTHOUSE DR

22 Suffix, Apt. #, etc.

27 Suffix, Apt. #, etc.

23 City/State

JUPITER FL

26 City/State

JUPITER FL

24 Zip Country

33469

29 Zip Country

33469

9. Name and Address of Current Registered Agent

BARFIELD, RICHARD D., M.D.
JOHN F. KENNEDY MEMORIAL HOSPITAL
ATLANTIS FL

10. Name and Address of New Registered Agent

81 Name

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

103 LIGHTHOUSE DR

83

84

JUPITER

FL

85

Zip Code

33469

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

Richard D. Barfield, M.D.

3/10/95

12. OFFICERS AND DIRECTORS

12a

DP
BARFIELD, RICHARD D
103 LIGHTHOUSE DR
JUPITER FL

12b

12c

12d

12e

12f

12g

12h

12i

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a

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14. I hereby certify that the information required with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included in 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 607, Florida Statutes; and that my name appears in Item 12 or Item 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard D. Barfield, M.D.

3/10/95 (407) 575-5721

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

(Date)

(Phone Number)