

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

**APPROVED
AND
FILED**

95 APR 28 AM 10: 28

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F92165 (2)

1. Corporation Name
TOBA M. SMITH, P.A.

Principal Place of Business
**% TOBA M. SMITH
1501 NW 68 TERRACE
GAINESVILLE FL 32605**

Mailing Address
**% TOBA M. SMITH
1501 NW 68 TERRACE
GAINESVILLE FL 32605**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/27/1982	3a. Date of Last Report 04/27/1994
4. FEI Number 59-2207419	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	

2. Principal Place of Business 21 5200 C Newberry Road	2a. Mailing Address 26 10424 SW 41st Place
Suite, Apt. #, etc. 22 Gainesville FL	Suite, Apt. #, etc. 27 Gainesville FL
City & State 23 32607	City & State 28 32608
Zip 24 32607	Country 25 Florida
Zip 29 32608	Country 30

9. Name and Address of Current Registered Agent SMITH, TOBA M. 1501 NW 68 TERRACE GAINESVILLE FL 32605	10. Name and Address of New Registered Agent <table border="1"><tr><td>81 Name</td><td></td></tr><tr><td>82 Street Address (P.O. Box Number is Not Acceptable)</td><td></td></tr><tr><td>83</td><td></td></tr><tr><td>84 City</td><td>FL</td></tr><tr><td>85 Zip Code</td><td></td></tr></table>	81 Name		82 Street Address (P.O. Box Number is Not Acceptable)		83		84 City	FL	85 Zip Code	
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 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

(DATE) Registered Agent signature required when re-stating

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	☒ Change ☐ Addition
NAME	SMITH, TOBA M	1.2 NAME	
STREET ADDRESS	5200 W NEWBERRY RD Bldg C	1.3 STREET ADDRESS	5200-C Newberry Rd
CITY- ST- ZIP	GAINESVILLE, FL-00000 32607	1.4 CITY- ST- ZIP	Gainesville FL. 32607
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY- ST- ZIP		2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 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)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Toba M. Smith Toba M. Smith P.A.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-95
Date

904 373 383
Signature Number