

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

FILED  
Aug 12 1998 8:00am  
Secretary of State

DOCUMENT # **F96000001359 (6)**

1. Corporation Name  
**TELEPRACTICE, INC.**



Principal Place of Business

**1422 ENCLUD AVENUE  
CLEVELAND OH 44115-1901**

Mailing Address

**1422 ENCLUD AVENUE  
CLEVELAND OH 44115-1901**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/18/1996**

4. FEI Number

**34-1721097**

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 owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

**21 1319 Ozkan St.**

Suite, Apt. #, etc.

**22 City & State  
McLean VA**

**23 Zip 22101 Country USA**

**24**

2a. Mailing Address

**26 1319 Ozkan St.**

Suite, Apt. #, etc.

**27 McLean VA**

**28 City & State**

**29 Zip 22101 Country USA**

**30**

9. Name and Address of Current Registered Agent

**DENNIS, SHARON  
4190 BELFORT RD, STE 340  
JACKSONVILLE FL 32216**

10. Name and Address of New Registered Agent

**81 Name Ferrell Ernest MD**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**4130 Salisbury Rd Ste 1100**  
**83 4555 Emerson St, STE 220**  
**84 City Jacksonville FL 85 Zip Code 32216**

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 **Er Ferrell MD** **Chairman Board of Directors** **8/5/98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
C	FERRELL, ERNST M.D.	4130 SALISBURY RD., STE. 1100	JACKSONVILLE FL 32216	<input type="checkbox"/>
D	FERGUSON, JAMES DR.	448 EAST, 6400 SOUTH SUITE 350	SALT LAKE CITY UT 84107	<input type="checkbox"/>
D	ALEMI, FARROKH PH.D.	1801 E. 9TH, OHIO SAVINGS PLAZA, SUITE 500	CLEVELAND OH 44115	<input type="checkbox"/>
CEO	DENNIS, SHARON C	4190 BELFORT ROAD, STE 340	JACKSONVILLE FL	<input checked="" type="checkbox"/>
D	FERRELL, IRISH D	6724 EPPING FOREST WAY N	JACKSONVILLE FL	<input checked="" type="checkbox"/>
S	KOEGLER, STEVEN	10151 DEERWOOD PARK BLVD, BLDG 100 STE 200	JACKSONVILLE FL 32216	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP
C	Ernst Ferrell, Ernest M.D.	4555 Emerson St Ste 220	Jacksonville FL 32207-4958					CEO	Alemi Farrokh	1319 Ozkan St.	McLean VA 22101												

14. 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 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 **Jul. 10 98 713 893 3799**

CR2E034 (5/98)