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FILED  
May 19 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000003575 (5)

1. Corporation Name  
TAMPA BAY MEDICAL RESOURCES, INC.

Principal Place of Business

2701 N. ROCKY POINT DR, SUITE 650  
TAMPA FL 33607

Mailing Address

2701 N. ROCKY POINT DR, SUITE 650  
TAMPA FL 33607-5921



3. Date Incorporated or Qualified  
07/16/1996

3a. Date of Last Report

2. Principal Place of Business

21 155 STATE ST  
Suite, Apt. #, etc.

2a. Mailing Address

26 155 STATE ST  
Suite, Apt. #, etc.

4. FEI Number  
59-3379620

Applied For  
Not Applicable

22 City & State

23 HACKENSACK NJ  
Zip Country

27 City & State

28 HACKENSACK NJ  
Zip Country

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME FARRELL, WILLIAM D  
STREET ADDRESS 2701 N. ROCKY POINT DR, SUITE 650  
CITY-ST-ZIP TAMPA FL 33607

TITLE VSTD  
NAME ADAMSON, ROBERT J  
STREET ADDRESS 2701 N. ROCKY POINT DR, SUITE 650  
CITY-ST-ZIP TAMPA FL 33607

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME FARRELL, WILLIAM D  
1.3 STREET ADDRESS 155 STATE ST  
1.4 CITY-ST-ZIP HACKENSACK NJ 07601

2.1 TITLE V  
2.2 NAME T. O'Malley  
2.3 STREET ADDRESS 155 STATE ST  
2.4 CITY-ST-ZIP HACKENSACK NJ 07601

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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.

CR2E034 (9/96)