

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F91000005833 1. Corporation Name Gulf Coast Clinical Services, Inc.		

Principal Place of Business Gulf Coast Clinical Services, Inc.	Mailing Address 253 St. Anthony St. Mobile, AL 36603
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2. Principal Place of Business 21 Gulf Coast Clinical Services, Inc. Suite, Apt. #, etc. 22 City & State Mobile AL 23 Zip 36603 24 Country USA	2a. Mailing Address 26 253 St. Anthony St. Suite, Apt. #, etc. 27 City & State Mobile, AL 28 Zip 36603 29 Country USA
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DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified Nov. 3, 1997	
4. FEI Number 63-1175-827	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	

9. Name and Address of Current Registered Agent CT Corporation 1200 South Pine Island Road Plantation, FL 33324	
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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		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	President	☐ DELETE			
NAME	Lori A. Nesbitt				
STREET ADDRESS	253 St. Anthony St.				
CITY-ST-ZIP	Mobile, AL 36603				
TITLE	Vice President	☐ DELETE			
NAME	Suzanne Collins				
STREET ADDRESS	253 St. Anthony St.				
CITY-ST-ZIP	Mobile, AL 36603				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
11 TITLE		☐ Change ☐ Addition			
12 NAME					
13 STREET ADDRESS					
14 CITY-ST-ZIP					
21 TITLE		☐ Change ☐ Addition			
22 NAME					
23 STREET ADDRESS					
24 CITY-ST-ZIP					
31 TITLE		☐ Change ☐ Addition			
32 NAME					
33 STREET ADDRESS					
34 CITY-ST-ZIP					
41 TITLE		☐ Change ☐ Addition			
42 NAME					
43 STREET ADDRESS					
44 CITY-ST-ZIP					
51 TITLE		☐ Change ☐ Addition			
52 NAME					
53 STREET ADDRESS					
54 CITY-ST-ZIP					
61 TITLE		☐ Change ☐ Addition			
62 NAME					
63 STREET ADDRESS					
64 CITY-ST-ZIP					

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: Lori A. Nesbitt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
February 10, 1998 (334) 432-9006

CR2E034 (10/97)