

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # G31269						FILED 04 APR 15 PM 3:26 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Entity Name HALIFAX EMERGENCY PHYSICIANS MEEK & ASSOCIATES, M.D., P.A.							
Principal Place of Business 303 N CLYDE MORRIS BLVD P O BOX 11107 DAYTONA BCH, FL 32114-2709				Mailing Address P O BOX 11107 DAYTONA BEACH, FL 32120 US			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-2271175				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
MEEK, WILLIAM H. 303 N CLYDE MORRIS BLVD DAYTONA BCH, FL 32015				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DSVP	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	MACMAHON, KEVIN			NAME	200033472402 04/21/04--01071--008 **\$61.25		
STREET ADDRESS	303 N CLYDE MORRIS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			CITY-ST-ZIP			
TITLE	DPT	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	MEEK, WILLIAM H			NAME			
STREET ADDRESS	303 N CLYDE MORRIS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			CITY-ST-ZIP			
TITLE	1VP	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	HENSON, JAMES			NAME			
STREET ADDRESS	303 N CLYDE MORRIS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			CITY-ST-ZIP			
TITLE	4VP	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	MATHIS, ROBERT	→		NAME	3RD VP ROBERT MATHIS 303 N CLYDE MORRIS BLVD DAYTONA FL 32114		
STREET ADDRESS	303 N CLYDE MORRIS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			CITY-ST-ZIP			
TITLE	5VP	☐ Delete		TITLE	☒ Change ☐ Addition		
NAME	ADAMS, OMAR	→		NAME	4TH VP OMAR ADAMS 303 N CLYDE MORRIS BLVD DAYTONA FL 32114		
STREET ADDRESS	303 N CLYDE MORRIS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114			CITY-ST-ZIP			
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition		
NAME				NAME	SEE ATTACHED FOR ADDITIONAL OFFICERS		
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other lists empowered.							
SIGNATURE: <i>William H. Meek</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date: 4/7/04 Daytime Phone #: 386 253 3238			

Halifax Emergency Physicians
Meek and Associates, M.D., P.A.

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April 7, 2004

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Attached is our amended annual report along with our check in the amount of \$61.25. I have changed the office held in # 11 for Mathis and Adams (now 3rd and 4th VP) and please consider this the attachment for #11 Additions To Officers:

Title	Name	Address
Asst Sec'y	J Steven Bohannon	303 N Clyde Morris Blvd Daytona Beach, FL 32114
Asst Treas	Gary Morrison	303 N Clyde Morris Blvd Daytona Beach, FL 32114
6 th VP	Kirby Haws	303 N Clyde Morris Blvd Daytona Beach, FL 32114
5 th VP	John Prairie	303 N Clyde Morris Blvd Daytona Beach, FL 32114
7 th VP	Richard Mohammed	303 N Clyde Morris Blvd Daytona Beach, FL 32114
8 th VP	Paul Mucciolo	303 N Clyde Morris Blvd Daytona Beach, FL 32114
9 th VP	Luther St James	303 N Clyde Morris Blvd Daytona Beach, FL 32114
10 th VP	Peter Springer	303 N Clyde Morris Blvd Daytona Beach, FL 32114

Sincerely,



William Meek, MD, President
Halifax Emergency Physicians
Meek & Associates, MD PA

P.O. Box 11107
Daytona Beach, Florida 32120
Phone (386) 253-3238 Fax (386) 255-7522