FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 10: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G31464** **(2)**

1. Corporate Name
GRAHAM HEALTH SYSTEMS OF PANAMA CITY BEACH, INC.

Principal Place of Business
8713 FRONT BCH. RD.
PANAMA CITY BCH. FL 32408
US

Mailing Address
7604 KINGMAN STREET
C/O ALAN WAYNE GRAHAM
PANAMA CITY FL 32408

3. Date Incorporated or Qualified: 04/01/1983
3a. Date of Last Report: 06/20/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. #, etc. — 22 — 27
City & State — 23 — 28
24 — 25 — 29 — 30

4. FEI Number: 59-2278558 — 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. Is this a Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent
GRAHAM, ALAN WAYNE
7604 KINGMAN STREET
PANAMA CITY FL 32408

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 Section 607.0505 of the 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. The corporation is currently qualified to transact business in Florida.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GRAHAM, ALAN WAYNE
STREET ADDRESS	7604 KINGMAN STREET
CITY, ST, ZIP	PANAMA CITY, FL 00000
TITLE	DV
NAME	GRAHAM, RAMONA KYZAR
STREET ADDRESS	7604 KINGMAN STREET
CITY, ST, ZIP	PANAMA CITY FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS — Change / Add

14. I hereby certify that the facts stated herein are true. I am aware that false information submitted to a state agency or division is punishable pursuant to Section 817.155, Florida Statutes. I further certify that I am an officer or director of the corporation or the agent of the corporation upon whom such process may be served, and that my name appears above, or on an attached amendment, or on a separate document, with my title or capacity as a director, officer or agent.

SIGNATURE: ALAN WAYNE GRAHAM — 4/3/95 — 904 872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0031524 CP