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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G59512

1. Corporation Name

OBSTETRICS AND GYNECOLOGY ASSOCIATES, P.A.

Principal Place of Business Mailing Address CO ALLAN T. PRATT 610 OAK COMMONS BLVD. KISSAMEE FI. 3/41 S.D. Do NOT WRITE IN THIS SPACE										
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9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florids. Statutes, the above-name dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name dorporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name registered or registered agent of purpose of changing its registered office or registered agent, or both, in the State of Florids. Statutes, the above-name registered or registered agent of the florids. Statutes, the above-name registered or registered agent of Florids. Statutes, the above-name registere		Country	1-01	Zip	Country					
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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, with all other like empowered.

SIGNATURE: