FILED
Jan 22, 2007 08:00 AM
Secretary of State

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G68738

Entity Name:
INSOI PUTNAM FAMILY PRACTICE ASSOCIATES.

Principal Place of Business	Mailing Address
INDA P. JOHNSON-BENNETT S. PALM AVENUE TKA, FL 32177-4143	C/O LINDA P. JOHNSON-BENNETT 301 S. PALM AVENUE PALATKA, FL 32177-4143

01172007 No Chg-P CR2E034 (11/05)

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4. FEI Number 59-2361831 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NETT CHARLES
S. PAL M AVENUE
ATKA, FL 32177

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The above 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: Charles Bennett (Authorized typed or printed name of registered agent and title if applicable. (all for Registered Agent signature required when reinstating)) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS

PD
OHNSON-BENNETT, LINDA
ADDRESS 301 S PALM AVE
CITY-ST-ZIP PALATKA, FL 00000,

BENNETT, CHARLES
ADDRESS 301 S PALM AVE
CITY-ST-ZIP PALATKA, FL

ADDRESS
CITY-ST-ZIP

ADDRESS
CITY-ST-ZIP

ADDRESS
CITY-ST-ZIP

ADDRESS
CITY-ST-ZIP

000005271[illegible]
01/24/07-80045-021 150.00

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 like empowered.

SIGNATURE: Charles Bennett 1/17/07 3863287493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #