Intering Academics       Table 3         Intering Academics       Still OVERSES HIGHWAY SUITE 500 MARATHON FL 33000       Still OVERSES HIGHWAY SUITE 500 MARATHON FL 3000       Name Still OVERSES HIGHWAY SUITE 500 MARATHON FL 3000       Name Still OVERSES HIGHWAY SUITE 500 MARATHON FL 3000       Still OVERSES HIGHWAY SUITE 500 MARATHON FL 3000       Name Still OVERSES HIGHWAY SUITE 500 MARATHON FL 3000       Still OVERSES HIGHWAY SUITE 5000 MARATHON FL 3000       Still OVERSES HIGHWAY SUITE 5	Principal Place of Business Mailing Address  Bisl OVERSEAS HIGHWAY SUITE 500 MARATHON FL 33050  2. Principal Place of Business 2. Principal Place of Principal Statute 2. Principal Place of Principal Statute 2. Principal Place of Principal Statute 2. Principal Place of Principal Place of Business 2. Principal Place of Principal Place of Principal Place Place Place of Principal Place of Place Office Place Place of Place Office Place	Country 30 81 Name 82 Street Act	07/06/1984       03/28/1995         4. FEI Number       Applied For         5. Certificate of Status Des.red       \$8.75 Additional         6. Election Campaign Financing       \$5.00 May Be         Trust Fund Contribution       \$5.00 May Be         8. This corporation has hability for intangible fax under s 199.032,         Florida Statutes       Yes         10. Name and Address of New Registered Agent
Consistence of Business	Principal Place of Business       2a. Mailing Address         Suite. Apt #, etc.       27         City & State       27         City & State       28         Zip       29         25       29         9. Name and Address of Current Registered Agent         MANKOWITZ, BARRY J., M.D.         8151 OVERSEAS HK#WAY         SUITE 500         MARATHON FL 33050         1. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida. Such change was a egent. I am familiar with, and accept the obligations of, Section 607.0505, Flo         IGNATURE         Signature types or protect came of registered Agent MANKOWITZ, BARRY J.         2.       OFFICERS AND DIRECTORS         ITLE       P         MANKOWITZ, BARRY J.         286 MORTON ST.         ITV: ST-2/P         ITLE         MARATHON FL         ITLE         MARATHON FL         ITLE         MARATHON FL         ITLE         MAR         ITLE       DELETE         MARE       DELETE         ITV: ST-2/P       DELETE         ITLE       DELETE         ITLE       DELETE	30 81 Name 82 Street Act	07/06/1984       03/28/1995         4. FEI Number       Applied For         5. Certificate of Status Des.red       \$8.75 Additional         6. Election Campaign Financing       \$5.00 May Be         Trust Fund Contribution       \$5.00 May Be         8. This corporation has hability for intangible fax under s 199.032,         Florida Statutes       Yes         10. Name and Address of New Registered Agent
Baile         59-2439177         Mat Apple           Suite Apl. #, etc.         Suite, Apl. #, etc.         Stood of Suite, Apl. #, etc.         Stood of	26         Suite. Apt. #, etc.         City & State         Zip         20         21         City & State         28         Zip         25         29         9. Name and Address of Current Registered Agent         MANKOWITZ, BARRY J., M.D. 8151 OVERSEAS HIGHWAY SUITE 500 MARATHON FL 33050         1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida Such change was a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute OFFICERS AND DIRECTORS         IGNATURE         Signature types or prefer tame of registered agent and tec'l applicable         (WDI C.         OFFICERS AND DIRECTORS         IRE       P         MARKOWITZ, BARRY J.         REET ADDRESS         1Y. ST-ZIP         ILE       DELETE         INE	30 81 Name 82 Street Act	59-2439177       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 has hability for intangible fax under s 199.032, Florida Statutes       Yes No         10. Name and Address of New Registered Agent
Image: constraint of the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the provisions of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the propose of change it for the state of ficing state of the optigations of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the propose of change it for the state of ficing state of the optigations of Sections 607 0502 and 607 1508. Florida Statutes the above-hanied corporation submits this statement for the propose of change it for the state of ficing state of the optigation of the optigatit the optigatit of the optigation of the optigation of the	Zip     City & State       Zip     Zip       25     29       9. Name and Address of Current Registered Agent       MANKOWITZ, BARRY J., M.D.       8151 OVERSEAS HIGHWAY       SUITE 500       MARATHON FL 33050         I. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida Such change was a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute OFFICERS AND DIRECTORS       IGNATURE       Signature types or prefed rame of registered agent and test if applicable       NANKOWITZ, BARRY J.       REET ADDRESS       Ty: S1-2iP       ILE       ME       REET ADDRESS       Ty: S1-2iP       ILE       ILE       INE       REET ADDRESS       Ty: S1-2iP       ILE       INE       REET ADDRESS       Ty: S1-2iP       ILE       INE	30 81 Name 82 Street Act	<ul> <li>5. Certificate of Status Desired</li> <li>6. Election Campaign Financing Trust Fund Contribution</li> <li>8. This corporation has hability for intangible fax under s 199.032, Florida Statutos</li> <li>10. Name and Address of New Registered Agent</li> </ul>
City & State       City & State       6. Election Campaign Financing       \$5.00 May Be Added to Frees         Zp       Country       2p       Country       8. This corporation has habity for manophiling ar under is 190.032         Joint State       2p       Country       10. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         MANKOWITZ, BARRY J., M.D.       8151 OVERSEAS HIGHWAY       811 Name       82         SUITE 500       MARATHON FL 33050       83       10. Name and Address of New Registered Agent       83         Pursuant to the provisions of Sections 607 0502 and 607.1508. Floreds Statutes       64       City       Flore Coupston's Non Number is Not Acceptable)       83         Bit Nortice of registered agent of both in the State of Florida. Such change was authored by the corporation submits this statement for the purpose of changing its registered agent of both in the State of Florida. Such change was authored by the corporation's board of directors'. Thereby accept the exploritment es registered agent of both in the State of Florida. Statutes       10. Name advecet agent of both in the State of Florida. Statutes       10. Name advecet agent of both in the State of Florida. Statutes       10. Name advecet agent of both in the State of Florida. Statutes       10. Name advecet agent of both in the State of Florida. State the approximation advecet agent of both in the State of Florida. State the approximation advecet agent of both in the State of Florida. State the approximates agent advecet agent of both in the State of Florida. State the	City & State  City & State  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	30 81 Name 82 Street Act	Trust Fund Contribution     Added to Fees       8. This corporation has liability for intangible Jax under s. 199.032, Florida Statutes     Yes X       10. Name and Address of New Registered Agent
Zip         Country         Zip         Country         8. This corporation has liability for maniphic part under is 190.032           9. Name and Address of Current Registered Agent         10. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent           MANKOWITZ, BARRY J, M.D. 8151 OVERSEAS HIGHWAY SUFFE 500 MARATHON FL 33050         61         Name         61         Name           82         Street Address (PO, Box Number is Not Acceptable)         63          64         Crity         FL         65         Z/p Codo           9         Pursuant to the provisions of Sections 607.0502 and 607.1508, Honda Statutes the above-hamed corporation submits this statement for the purpose of changing its registered agent of both, in the State of Fiords. Such change was authored by the corporation should directors thereby accept the appointement ergistered agent of both, in the State of Fiords. Such change was authored by the corporation should of directors. Thereby accept the appointement ergistered agent of both, in the State of Fiords. Such change was authored by the corporation should of directors. Thereby accept the appointement ergistered agent of the director englistered agent of the director englistered agent of the director englistered agent of the appointement ergistered agent of the director englistered agent of the director englistered agent of the appointement ergistered agent of the directors. T	Zip Country Zip 29 9. Name and Address of Current Registered Agent MANKOWITZ, BARRY J., M.D. 8151 OVERSEAS HKHWAY SUITE 500 MARATHON FL 33050  Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida Such change was a agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo OFFICERS AND DIRECTORS  FUNCTION ST. Signature types or priced name of registered agent and lite if applicable (N27) OFFICERS AND DIRECTORS  FE P ME MANKOWITZ, BARRY J. 286 MORTON ST. Y-S1-2iP FE ME KET ADDRESS Y-S1-2iP FE ME KET ADDRE	30 81 Name 82 Street Act	B. This corporation has hability for intangible Jax under s 199.032, Florida Statutes Yes No     No     Name and Address of New Registered Agent
S. Name and Address of Current Registered Agent     ANKOWTZ, BARRY J, M.D.     SIST OVERSEAS HGHWAY     SUFFE 500     MARATHON FL 33050     B2     Street Actoress (P.O. Box Number is Not Acceptable)     B2     Street Actoress (P.O. Box Number is Not Acceptable)     B2     City     City	S. Name and Address of Current Registered Agent      MANKOWITZ, BARRY J., M.D.     8151 OVERSEAS HKHWAY     SUITE 500     MARATHON FL 33050   Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statute     office or registered agent, or both, in the State of Florida. Such change was a     agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo  GNATURE  Signature typed or printed name of registered agent and lide if applicable  OFFICERS AND DIRECTORS  LE  P ME ME MANKOWITZ, BARRY J.  286 MORTON ST.  Y-ST-ZIP LE ME KET ADDRESS Y-ST-ZIP LE ME KET ADDRESS Y-ST-ZIP LE ME	81 Name 82 Street Ac	10. Name and Address of New Registered Agent
MANKOWITZ, BARRY J, M.D.       62       Street Address (P.D. Box Number is Not Acceptable)         Bit 10 OVERSEAS HIGHWAY       83         SUFFE 500       MARATHON FL 33050         Bit 2 City       FL         Bit 2 City       FL         Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes the observe hamed corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida Statutes the observe hamed corporation's board of directors. Thereby accept the appointment its registered agent. or both, in the State of Florida Statutes the statement for the purpose of changing its registered agent. Thereby accept the appointment its registered agent. Thereby accept the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Thereby accept the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered agent. Statement for the purpose of the appointment its registered a	8151 OVERSEAS HIGHWAY SUITE 500 MARATHON FL 33050         Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida Such change was a egent. I am familiar with, and accept the obligations of, Section 607.0505, Flo SNATURE         Stignature: typeo or profed name of registered agen; and Idea if applicable       (NOT)         OFFICERS AND DIRECTORS       0         E       P       DELETE         AE       MANKOWITZ, BARRY J.         EET ADDRESS       286 MORTON ST.         (-ST-2IP       DELETE         E       P         Image: Deleter error of the provision of the state of	82 Street Ad	ddress (P.O. Box Number is Not Acceptable)
office or registered agont, 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. Lam familiar with, and accept the obligations of, Section 607 0567, Florida Statutes  SNATURE      The state of registered agont, 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. Lam familiar with, and accept the obligations of, Section 607 0567, Florida Statutes  SNATURE      The state of registered agont, 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. Lam familiar with, and accept the obligations of, Section 607 0567, Florida Statutes  SNATURE      The state of registered agont, or both, in the State of Florida. State fagility agont agont and for displaying were registered agont, or both, in the State of Florida. State fagility agont agon	office or registered agent, or both, in the State of Florida. Such change was a agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo SNATURE  Signature: types or printed name of registered agen; and title if applicable OFFICERS AND DIRECTORS  E P OFFICERS AND DIRECTORS  E P RE BANKOWITZ, BARRY J. BERT ADDRESS (-ST-2IP E F RE FET ADDRESS (-ST-2IP E FET ADDRESS (		
E       P	LE P DELETE MANKOWITZ, BARRY J. 286 MORTON ST. Y-ST-ZIP LE DELETE ME KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE DELETE ME KEET ADDRESS Y-ST-ZIP LE DELETE ME KEET ADDRESS Y-ST-ZIP LE DELETE ME LE DELETE	authorized by the corpora orida Statutes	ration's board of directors. Thereby accept the appointment as registered
ME         MANKOWITZ, BARRY J.         12 NAVE           LEET ADDRESS         286 MORTON ST.         13 STREET ADDRESS           Y-ST-ZIP         MARATHON FL         14 CIY-ST-ZIP           ME         22 NAVE         22 NAVE           VE         23 STREET ADDRESS         3 STREET ADDRESS           Y-ST-ZIP         24 CIY-ST-ZIP         Change         Add           ME         23 STREET ADDRESS         24 CIY-ST-ZIP         Change         Add           V-ST-ZIP         24 CIY-ST-ZIP         Change         Add           WE         32 STREET ADDRESS         33 STREET ADDRESS         Change         Add           VE         DELETE         31 ITILE         Change         Add           WE         32 STREET ADDRESS         33 STREET ADDRESS         Change         Add           Y-ST-ZIP         34 CIY-ST-ZIP         Change         Add           VEE ADDRESS         33 STREET ADDRESS         Change         Add           Y-ST-ZIP         34 CIY-ST-ZIP         Change         Add           VEE         DELETE         41 ITILE         Change         Add           VEE         DELETE         41 STREET ADDRESS         Y-ST-ZIP         Change         Add	ME MANKOWITZ, BARRY J. EEET ADDRESS 286 MORTON ST. Y-ST-2IP MARATHON FL DELETE ME EEET ADDRESS Y-ST-ZIP DELETE ME EEET ADDRESS Y-ST-ZIP DELETE ME EEET ADDRESS Y-ST-ZIP DELETE ME EEET ADDRESS Y-ST-ZIP DELETE ME EEET ADDRESS Y-ST-ZIP DELETE ME EEET ADDRESS	• • • • • • • • • • • • • • • • •	
LE       DELETE       21 TiTLE       Change       Add         WE       22 NAME       23 STREET ADDRESS       23 STREET ADDRESS       24 CiTY - S1 - 2iP	LE DELETE WE	1 2 NAME 1 3 STREET ADDRESS	
REET ADDRESS       2 3 STREFT ADDRESS         Y-ST-2IP       2 4 CITY-ST-2IP         LE       DELETE       3 1 ITLE         ME       3 2 NAME         Y-ST-2IP       3 3 STREFT ADDRESS         Y-ST-2IP       3 4 CITY-ST-7IP         LE       DELETE       4 1 ITLE         ME       4 2 NAME         NEET ADDRESS       4 3 STREFT ADDRESS         Y-ST-2IP       4 4 CITY-ST-7IP         LE       DELETE       4 3 STREET ADDRESS         Y-ST-7IP       4 4 CITY-ST-7IP         LE       DELETE       4 3 STREET ADDRESS         Y-ST-7IP       4 4 CITY-ST-7IP         LE       DELETE       4 3 STREET ADDRESS         Y-ST-7IP       4 4 CITY-ST-7IP         LE       DELETE       5 3 STREET ADDRESS         Y-ST-7IP       4 4 CITY-ST-7IP         LE       DELETE       5 1 TILE         ME       S 2 NAME         ILE       Change       Add         ME       5 2 NAME         S 3 STREET ADDRESS       5 3 STREET ADDRESS         Y-ST-7IP       5 4 CITY-SI-7IP	V-ST-ZIP		Change Add tion
E       DELETE       3.1 Title       Change       Add         AE       3.2 NAME       3.3 STREF1 ADDRESS       3.3 STREF1 ADDRESS         AE       DELETE       4.1 Title       Change       Add         AE       DELETE       4.1 Title       Change       Add         AE       ASTREF1 ADDRESS       Add       Add         AE       DELETE       4.1 Title       Change       Add         AE       4.2 NAME       4.2 NAME       Add       Add         AE       4.3 STREET ADDRESS       Add Citry - St - ZiP       Add       Add         EET ADDRESS       4.4 Citry - St - ZiP       Change       Add         AE       DELETE       5.1 Title       Change       Add         AE       DELETE       5.1 Title       Change       Add         AE       Street ADDRESS       Street ADDRESS       Add         AE       Street ADDRESS       Street ADDRESS       Street ADDRESS       Street ADDRESS         AE       Street ADDRESS       Street ADDRESS       Street ADDRESS       Street ADDRESS         AF       Street ADDRESS       Street ADDRESS       Street ADDRESS       Street ADDRESS         AF       Street ADDRESS       Stree	E DELETE AE EET ADORESS A-ST-ZIP E ET ADORESS AE EET ADORESS (-ST-ZIP E DELETE AE E DELETE AE		
Steet ADDRESS       3 3 STREFT ADDRESS         Y-ST-ZIP       34 CITY - ST-ZIP         LE       DELETE       41 TITLE       Change       Add         ME       4 2 NAME         NEET ADDRESS       43 STREET ADDRESS         Y-ST-ZIP       43 STREET ADDRESS         Y-ST-ZIP       43 STREET ADDRESS         Y-ST-ZIP       44 CITY - ST-ZIP         LE       DELETE       51 TITLE         LE       DELETE       51 TITLE         ME       S2 NAME       53 STREET ADDRESS         Y-ST-ZIP       53 STREET ADDRESS         Y-ST-ZIP       54 CITY - ST-ZIP	NEET ADDRESS           Y-ST-ZIP           LE           ME           REET ADDRESS           Y-ST-ZIP           LE           DELETE		Change Addition
E         DELETE         4 1 title         Change         Acc           AE         4 2 NAME         4 2 NAME         4 3 STREET ADDRESS         4 3 STREET ADDRESS         4 3 STREET ADDRESS         4 4 City - Si - ZiP         Change         Add           E         DELETE         5 1 Title         Change         Add           AE         DELETE         5 1 Title         Change         Add           AE         5 2 NAME         5 3 STREET ADDRESS         5 3 STREET ADDRESS         5 4 City - Si - ZiP	E DELETE AE EET ADORESS (-ST-ZIP E DELETE AE		
A 3 STREET ADORESS           Y-ST-ZIP         4 4 CITY - ST - ZIP           LE         DELETE         5 1 TITLE           AE         5 2 NAME           LEET ADDRESS         5 3 STREET ADDRESS           Y-ST-ZIP         5 4 CITY - ST - ZIP	RET ADORESS Y-ST-ZIP .E DELETE AE		Change Addition
Y-ST-ZIP         44 CITY - ST-ZIP           LE         DELETE         51 TITLE         Change         Add           ME         52 NAME         53 STREET ADDRESS         53 STREET ADDRESS         44 CITY - ST-ZIP           Y-ST-ZIP         54 CITY - ST-ZIP         54 CITY - ST-ZIP         54 CITY - ST-ZIP	Y-ST-ZIP LE DELETE ME		
LE         DELETE         5.1 TITLE         Change         Add           ME         5.2 NAME         5.2 STREET ADDRESS         5.3 STREET ADDRESS         5.4 CITY - ST-ZIP         5.4 CITY - ST-ZIP <td>LE DELETE</td> <td></td> <td></td>	LE DELETE		
15 3 STREET ADDRESS           Y-ST-ZIP           5 4 CITY - ST-ZIP			Change Addition
P DELETE Prime L Observe L Observe L Observe L Adv	(-SI-ZIP		Change   Addition
LE DELETE 61 TITLE Change Add			Change Addition
6 3 STREET ADDRESS		6 1 TITLE	
TY-ST-ZP 64 CITY-ST-ZP 1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes 1		6 1 TITLE 6 2 NAME	quality for the exemption stated in Section 119.07(3)(k), Florida Statutes 1