FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT COMPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MICHA I # MOST I RIDA PHYSICIANS INSURA	(-)			
Principal Place of Business Mailing Address					
Principal Place of Business		Mailing Address		e cament men construction binde bibe defet defet defet diffet diffet diffet diffet film	
SUITE 800 1000 RIVERSIDE AVENUE JACKSONVILLE FL 32204		SUITE 800 1000 RIVERSIDE AVENUE JACKSONVILLE FL 32204		Date Incorporated or Qualified	
				10/10/1985 06/20/1995	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		59-6614702 Not Applicable	
Suite, Apt. :	#, @tC.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
City & State)	City & State		Fee Required 6. Election Campaign Financing \$5.00 May Re	
23		28		6. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zφ	Country	Zip	Country	8. This corporation has liability for intangible tax under s 199.032,	
24	25	29	30	Florida Statutes Yes No	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent	
Domin	TO DOMES D		bi Name		
Brewer, Donald R 1000 Riverside ave			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
			83		
SUITE 800 JACKSONVILLE FL 32204					
ONOTION TELEVISION		84 City	Ei 85 Zip Code		
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508. Florida Statute	s, the above-named corpo	oration submits this statement for the purpose of changing its registered office	
or registen familiar wit	ed agent, or both, in the State of Floi th, and accept the obligations of, Sec	rida. Such change was authori ze ction 607.0505. Florida Statut es .	d by the corporation's box	oration submits this statement for the purpose of changing its registered office and of directors. I hereby accept the appointment as registered agent. I am	
SIGNATURE:	, , , , , , , , , , , , , , , , , , , ,				
	Signature, typicd or printed name of registered ago		E: Registered Agent signature requir		
12.	T	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	D D	DELETE	1, 1 TITLE	Change Addition	
STREET ADORESS	HANKEN KAXAXAND 700x drugdahoke S	EE ATTACHED	1.2 NAME	See Attaches	
CITY-ST-ZIP		PPENDIX I	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	See Attaches Appendix II	
TITLE	D CECTAMORITATION OF THE	DELETE	2. 1 THE	Change Addition	
NAME	APPRIARYA ARARIANA		2.2 NAME	Change Manner	
STREET ADDRESS	2645 RIVERSIDE AVE	\'XX	2.3 STREET ADDRESS		
CHY-ST-ZIP	2545 RIMRIPSIDES AVEX JACKSONVALLE F		2.4 CITY - \$1 - ZIP		
TITLE	D	[] DELETE	3. 1 TITLE	Change Addition	
NAME	, BASERY, XRIGHARPXIXMD		3.2 NAME		
STREET ADDRESS	124 E WHILBOURNE WY		3.3. STREET ADDRESS		
CITY-ST-ZIP	WIONODER XPANK XFX X X X		3 4 CITY-SI - 7IP		
TITLE	D	DELETE	4. 1 THTLE	SUUDO1834号降配 O Addition	
NAME	BXMXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		4.2 NAME	500001834号是是 Addition -05/22/9601081038 ****200.00	
STREET ADDRESS	VYXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		4.9 STREET ADDRESS	ምምምረህህ. (())	
C-TY-ST-ZIP TITLE		DELETE	4.4 C(TY-ST-Z(P) 5. 1 T(TLE)	Chann D Astri-	
NAME	D Bribries Xiames XXMD	ET DELLE	5.1 TIPLE 5.2 NAME	Change Addition	
STREET ADDRESS	BOORWARD AVAINANT AVAINANT SEE YEE	9¢ V	5.3 STREET ADDRESS	•	
CITY-ST-7/P	MICHIKATXX MICHIKATXX	AΛ	5.4 CITY-ST-ZIP	M	
TILE	D	DELETE	6.1 TITLE	Change Addition	
NAME	GANSEX CHIRTIENEXOUSX		6.2 NAME	ON !	
STREET ADDRESS	7309 HIN 161 100 TH X		6.3 STREET ADDRESS	M.C.	

CNY-S1-7/P

SKROVERSULCKXX

64 CNY-S1-7/F

14. I 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. 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.

Appendix 1

Directors: Gaston J. Acosta-Rua, M.D. 2545 Riverside Avenue Jacksonville, FL 32204

Richard J. Bagby, M.D. 124 E. Welbourne Avenue Winter Park, FL 32789-4306

Robert O. Baratta, M.D. 2090 S.E. Ocean Blvd. Stuart, FL 34996-3304

James W. Bridges, M.D. 1190 N.W. 95th St., Suite 110 Miami, FL 33150

Curtis E. Gause, D.D.S. 7300 4th Street North St. Petersburg, FL 33702

J. Stewart Hagen, M.D. 3596 Broadway Ft. Myers, FL 33901

Kay K. Hanley, M.D. 707 Druid Road E. Clearwater, FL 34616

Louis C. Murray, M.D. 900 S. Delaney Orlando, FL 32806

Guy T. Selander, M.D. 1731 University Blvd. S. Jacksonville, FL 32216

Dick L. Van Eldik, M.D. 437 N. Country Club Drive Atlantis, FL 33462 Officers: William R. Russell, President

Steven R. Smith Executive Vice President

Donald R. Brewer Senior Vice President/Secretary

Steven M. Rosenbloom Senior Vice President

Robert B. Finch Vice President

R. Jeannie Whitter Vice President

Charles W. Emanuel Vice President

Ray A. Carey Vice President

Kurt F. Driscoll Vice President

Donald J. Sabia Controller

Address for all officers: PO Box 44033 Jacksonville, FL 32231-4033

Directors (continues)

James G. White, M.D. 1688 W. Granada Blvd., Suite 2B Ormond Beach, FL 32174

Henry M. Yonge, M.D. 14 W. Jordan Street Pensacola, FL 32501

William R. Russell (Director & President) FPIC PO Box 44033 Jacksonville, Florida 32231-4033 Appendix II

Changes in Directors & Officers between 12/31/94 and 12/31/95

Directors:

Officers:

None

Deletions:

R. Ray Pate, Jr. Vice President

Additions:

Donald J. Sabia

Controller