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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J01687 (9)

1. Corporation Name

MORGAN MEDICAL CORPORATION

Principal Place of Business

101 E. KENNEDY BLVD.
1010
TAMPA FL 33602

Mailing Address

101 E. KENNEDY BLVD.
1010
TAMPA FL 33602

3. Date Incorporated or Qualified

02/28/1986

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 430 MOUNTAIN AVE

2a. Mailing Address

26 430 MOUNTAIN AVE

Suite, Apt. #, etc.

22 40 NMR AMERICA

Suite, Apt. #, etc.

27 40 NMR AMERICA

City & State

23 MURRAY HILL NJ

City & State

28 MURRAY HILL NJ

Zip

24 07974

Country

25 UNION

Zip

29 07974

Country

30 UNION

4. FEI Number

59-2666659

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STRONG, MARK J.
101 E. KENNEDY BLVD. SUITE 1010
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name VCC FILING & SEARCH SERVICES, INC.
82 Street Address (P.O. Box Number is Not Acceptable)
526 EAST PARK AVENUE, SUITE 200
83
84 City TALLAHASSEE FL 85 Zip Code 32301-2551

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

VCC FILING & SEARCH SERVICES, INC. BY: Betty B. Young

3-12-94

Signature typed or printed name of registered agent and board applicable

(NOTE: Registered Agent signature required on statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME STRONG, J. MARK
STREET ADDRESS 1650 MULLETT CT
CITY-STATE-ZIP NAPLES FL

☒ DELETE

TITLE DSV
NAME GARRISON, SANDRA
STREET ADDRESS 1460 SUNSET DRIVE
CITY-STATE-ZIP WINTER PARK FL

☒ DELETE

TITLE D
NAME SILBINGER, MARTIN L. (M.D.)
STREET ADDRESS 1827 BAYSHORE BOULEVARD
CITY-STATE-ZIP TAMPA FL

☒ DELETE

TITLE D
NAME COOK, JAMES
STREET ADDRESS 991 SOMERSET DRIVE
CITY-STATE-ZIP ATLANTA GA 30327

☒ DELETE

TITLE D
NAME ACEY, THOMAS
STREET ADDRESS 132 10TH AVENUE N. #105
CITY-STATE-ZIP SAFETY HARBOR FL 34895

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE PD
2 NAME J. DASTI
3 STREET ADDRESS 430 MOUNTAIN AVE 40 NMR AMERICA
4 CITY-STATE-ZIP MURRAY HILL NJ 07974-2732

☐ Change ☒ Addition

2 1 TITLE VD
2 NAME J. P. O'MALLEY III
3 STREET ADDRESS 430 MOUNTAIN AVE 40 NMR AMERICA
4 CITY-STATE-ZIP MURRAY HILL NJ 07974-2732

☐ Change ☒ Addition

3 1 TITLE
2 NAME
3 STREET ADDRESS 900001740599
4 CITY-STATE-ZIP -03/13/96-01001--012

☐ Change ☐ Addition

4 1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY-STATE-ZIP

☐ Change ☐ Addition

5 1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY-STATE-ZIP

☐ Change ☐ Addition

6 1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY-STATE-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

JOHN P. O'MALLEY III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/96

908-665-9400

CR2E034 (12/95)