PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J65376 1. Corporation Name

SAND LAKE MEDICAL ASSOCIATES, P.A.

Principal Place of Business 7575 DR. PHILLIPS BLVD., SUITE 10 ORLANDO FL 32819

2. Principal Place of Business

Mailing Address

2a. Mailing Address

7575 DR. PHILLIPS BLVD., SUITE 10 ORLANDO FL 32819

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90123 009 ***300.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

04/03/1987

4. FEI Number

Suite, Apt. 8, etc. Suite, Apt. 8, etc.	21		26			59-2805125		Not	Applicable
City & State City & State	Suite, Apt.	#, etc.	Suite, Apt. #, etc.						
Zip	City & Stat	e	City & State			, , ,	, _	•	· 1
9. Name and Address of Current Registered Agent PHIPPS, LINDA K. 5100 HOWELL BRANCH ROAD WINTER PARK FL 32792 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 defined or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florids Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 16. DELETE 17. TITLE 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 18. STREET ADDRESS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADD		Country		Cou	ntrv		rrent year Ints		3, 000
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NITER PARK FL 32792 83	5100 HOWELL BRANCH ROAD				92 Street A	Address (B.O. Rev Number is Not Accer	table)		
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 agent, or both, in the State of Findria. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Findria. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a minimilar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE 12.					Street Address (P.O. Box Number is Not Acceptable)				
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receive versity was the monitoriation supplied with this limit does not quality 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:

ME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

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