

PAY 21 '96 10:41AM CAPITAL CONNECTION
FEE NOW. FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 MAY 22 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J68941

(0)

1. Corporation Name

DOCTORS' MANAGEMENT INCORPORATED

Principal Place of Business

Mailing Address

2631-A NW 41st Street
Gainesville, FL 32606
US

2631-A NW 41st Street
Gainesville, FL 32606
US

600001834456
-05/22/96-01038-015
***225.00 ***225.00

3. Date Incorporated or Qualified
04/17/1987

5a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-2792690

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐
6. Election Campaign Financing
Trust Fund Contribution ☐

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KING, WILLIAM D.
2631-A NW 41st Street
Gainesville, FL 32606

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

86 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature, again or signed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

KING, WILLIAM D.

STREET ADDRESS

2622 NW 27th PL
Gainesville, FL 32605

CITY-ST-ZIP

TITLE

S

☐ DELETE

NAME

EVANS, BASIL P., JR.

STREET ADDRESS

1911 NW 20th Way
Gainesville, FL 32605

CITY-ST-ZIP

TITLE

T

☐ DELETE

NAME

SMITH, JAMES L., JR.

STREET ADDRESS

3501 NW 30th Blvd.
Gainesville, FL 32605

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

600001834456
-05/22/96-01038-016
***225.00 ***225.00

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

B. Phillip Evans, Jr.

5/20/96 (352) 373-9140

Date

Daytime Phone