## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K02026

(8)

JOHN A. KINGSBURY, M.D., P.A.

FILED
Jan 14 1997 8:00am
Secretary of State



11/09/1987   01/23	] No
3. Date Incorporated or Qualified 11/09/1987 01/23  2. Principal Place of Business 28. Mailing Address 4. FEt Number 59-2869 167  Suite, Apt #, etc Suite, Apt #, etc. 5. Certificate of Status Desired □  City & State City & State 6. Election Campaign Financing Trust Fund Contribution □  Zip Country Zip Country 8. This corporation has liability for intangible to Florida Statutes ✓ Yes □	3/1996 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees tax under s. 199.032, No
25   26   59-2869 167     Suite, Apt #, etc   Suite, Apt #, etc.   5. Certificate of Status Desired	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees tax under s. 199.032, No
22   27   5. Certificate of Status Desired	\$5.00 May Be Added to Fees tax under s. 199.032, No
City & State  Country  Cou	Added to Fees tax under s. 199.032, No
Zip Country Zip Country 8. This corporation has liability for intangible to 25 29 30 Florida Statutes Yes	] No
	<del></del>
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered A	agent
KINGSBURY, JOHN A. 81 Name	
14434 TANGLEWOOD DR LARGO FL 34844  82 Street Address (P.O. Box Number is Not Acceptable)	
83	
FL	85 Zip Code 33714
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appoagent. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.  SIGNATURE  Structure required when reinstating DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND	DIBECTORS IN 12
	Change Addition
NAME KINGSBURY, JOHN A. 12 NAME	
STREET ADDRESS 14434 TANGLEWOOD DR 13 STREET ADDRESS	
City-SI-ZiP LARGO FL 1.4 City-ST-ZiP	33774
TITLE DELETE 2.1 TITLE	Change Addition
NAME 2.2 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
CHY-ST-ZIP 2 4 CHY-ST-ZIP	
TITLE DELETE 31 TITLE	Change Addition
NAVE 32 NAME	
STREET ADDRESS 33 STREET ADDRESS	
CITY-ST-7IP 34.CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CHY-SI-7P 44 CHY-SI-7P	<del></del>
TITLE DELETE 51 TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 54 CITY-ST-ZIP	<del></del>
THILE DELETE GATTILE	Change Addition
NAME 62 NAME	
STREET ADDRESS 63 STREET ADDRESS	
CITY-S1-ZIP 64 CiTY-ST-ZIP	

In I do hereby certify that the information supplied with this filing does not qualify 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 changing done an attachment with an address.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/97

1-813-596-6409