

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

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Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K74482** (6)

1. Corporation Name
METRO MEDICAL PLAZA, INC.

Principal Place of Business 13691 METRO PARKWAY SOUTH SUITE 100 FT MYERS FL 33912 US	Mailing Address 13691 METRO PARKWAY SOUTH SUITE 100 FT MYERS FL 33912-4321 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/21/1989	3a. Date of Last Report 02/29/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 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 WILLETT, THOMAS K. 100 W. KENNEDY BLVD. STE 750 TAMPA FL 33602		10. Name and Address of New Registered Agent	
		81 Name Holmes, Joseph J.	
		82 Street Address (P.O. Box Number is Not Acceptable) 13691 Metro Parkway S. Ste. 100	
		83	
		84 City Fort Myers	85 Zip Code FL 33912

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: *[Signature]* DATE: **3/7/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PDT	☐ DELETE	1.1 TITLE President	☒ Change ☐ Addition
NAME WILLETT, THOMAS K.		1.2 NAME Holmes, Joseph J.	
STREET ADDRESS 100 W. KENNEDY BLVD., STE 750		1.3 STREET ADDRESS 13691 Metro Parkway S. Ste. 100	
CITY-ST-ZIP TAMPA FL 33602		1.4 CITY-ST-ZIP Fort Myers FL 33912	☐ Change ☐ Addition
TITLE	☐ DELETE	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **3/7/97**

CR2E034 (9/96)