FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

FILED
Feb 15 1996 8:00 am
Secretary of State

DOCUMENT # L38084 (4)

1. Corporation Name
WHITE WILSON MEDICAL CENTER, P.A.

Principal Place of Business: 1005 MAR WALT DR, FT WALTON BEACH FL 32547-6707

Mailing Address: 1005 MAR WALT DR, FT WALTON BEACH FL 32547-6707

3. Date Incorporated or Qualified: 12/22/1989

3a. Date of Last Report: 02/21/1995

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: 59-3000333 ☐ 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

RIGGENBACH, ROGER D M.D.
1005 MARWALT DRIVE
FT WALTON BEACH FL 32547

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable ____ DATE ____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
P	RIGGENBACH, ROGER D.	81C POQUITO ROAD	FT WALTON BCH FL	☐ DELETE
T	RIGBY, DOUGLAS	289 BRIARWOOD	FT WALTON BEACH FL	☐ DELETE
VP	ROGERS, ROBERT L.	585 FAIRWAY COURT	FT WALTON BCH FL	☐ DELETE
S	HALE, LEALIS L	619 CAMBRIDGE NE	FT WALTON BCH FL	☐ DELETE
VP	NEGRON, EDDIE A	65 LAKE LORRAINE	SHALIMAR FL	☐ DELETE
D	LEVINE, JOSEPH E	108 HARRIS ST	FT WALTON BEACH FL	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	D	RYAN, KEVIN P.	819 CHOCTAW LANE	SHALIMAR, FL	☐	☒
2					☐	☐
3					☐	☐
4					☐	☐
5					☐	☐
6					☐	☐

CR2E034 (12/95)

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: ____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Roger D. Riggenbach, M.D., President

Date ____ Daytime Phone #: 904, 863-8100