FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 AM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M36984 (6)

1. Corporation Name
MEDICAL MANAGEMENT ASSOCIATES OF LAUDERDALE, INC

JAN 9 1995

Principal Place of Business	Mailing Address
2255 GLADES RD., STE. 416A BOCA RATON FL 33431 US	ATTN: TAX DEPT P. O. BOX 15309 DURHAM NC ~~33431~~ US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/18/1986
3a. Date of Last Report: 05/24/1994
4. FEI Number: 58-1692988 — 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. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes XX No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 27704 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 [illegible] DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE PD NAME LUCIBELLA, RICHARD STREET ADDRESS ~~2255 GLADES RD XXXXXXXXXXXXXXXXX~~ CITY-ST-ZIP ~~BOCA RATON FL XXXXXXXXXXXXXXX~~	X Change ☐ Addition 2400 E. Commercial Blvd., Ste. 315 Ft. Lauderdale, FL 33308
TITLE VS NAME BIRCH, WALTER E STREET ADDRESS ~~XXXXXXXXXXXXXXXXXXXX~~ CITY-ST-ZIP ~~XXXXXXXXXXXXXXXXX~~	X Change ☐ Addition 2400 E. Commercial Blvd., Ste. 315 Ft. Lauderdale, FL 33308
TITLE VTAS NAME HARDISTER, SHAWN W STREET ADDRESS ~~XXXXXXXXXXXXXXXXXXXX~~ CITY-ST-ZIP ~~BOCA RATON FL XXXXXX~~	X Change ☐ Addition 2400 E. Commercial Blvd., Ste. 315 Ft. Lauderdale, FL 33308
TITLE AS NAME SNEDEKER, ANGELA M STREET ADDRESS 2828 CROASDAILE DR. CITY-ST-ZIP DURHAM NC	☐ Change ☐ Addition
TITLE D NAME VALVERDE, FERNANDO M STREET ADDRESS ~~XXXXXXXXXXXXXXXXXXXX~~ CITY-ST-ZIP ~~XXXXXXXXXXXXXXXXX~~	X Change ☐ Addition 2400 E. Commercial Blvd., Ste. 315 Ft. Lauderdale, FL 33308
TITLE D NAME SALAZAR, GUILLERMO STREET ADDRESS ~~XXXXXXXXXXXXXXXXXXXX~~ CITY-ST-ZIP ~~MIAMI FL XXXXXXXXXXXX~~	X Change ☐ Addition 2400 E. Commercial Blvd., Ste. 315 Ft. Lauderdale, FL 33308

14. I do hereby certify that the information supplied with this filing [illegible] 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: Angela M. Snedeker — Angela M. Snedeker 4/28/95 919-383-0355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0002987 CP

M36984

ATTACHMENT

STATE OF FLORIDA
1995 CORPORATION ANNUAL REPORT

MEDICAL MANAGEMENT ASSOCIATES OF LAUDERDALE, INC.
DOCUMENT # M36984
FEIN: 58-1692988

ADDITIONAL OFFICERS

TITLE	Director
NAME	Andrew Richman, M.D.
STREET ADDRESS	2400 E. Commercial Blvd., Ste. 315
CITY-ST-ZIP	Ft. Lauderdale, FL 33308

TITLE	Director
NAME	Mike Solnik, M.D.
STREET ADDRESS	2400 E. Commercial Blvd., Ste. 315
CITY-ST-ZIP	Ft. Lauderdale, FL 33308