

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **M83426** (0)

1. Corporation Name  
**BRUCE J. ROGERS, M.D., P.A.**

FILED

95 JAN 27 PM 3:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
720 SOUTHWEST 2ND AVE. 720 SOUTHWEST 2ND AVE.  
SUITE 258 SUITE 258  
GAINESVILLE FL 32601 GAINESVILLE FL 32601

3. Date Incorporated or Qualified **07/01/1988** 3a. Date of Last Report **02/15/1994**  
4. FEI Number **59-2884485** 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 22 **Suite 405** 26 Suite, Apt. #, etc. 27 **Suite 405**  
23 City & State 28 City & State  
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**CARTER, CHARLES B.**  
**P.O. BOX 1526**  
**912 N.E. 2ND STREET**  
**GAINESVILLE FL 32602**

10. Name and Address of New Registered Agent  
81 Name **GARY EDINGER**  
82 Street Address (P.O. Box Number is Not Acceptable) **1110 NW 6 ST**  
83  
84 City **Gainesville** FL 85 Zip Code **32601**

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 **1/24/95**  
(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DPS</b>	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROGERS, BRUCE J.</b>	1.2 NAME	
STREET ADDRESS	<b>720 SW 2ND AVE #258</b>	1.3 STREET ADDRESS	<b># 405</b>
CITY - ST - ZIP	<b>GAINESVILLE FL</b>	1.4 CITY - ST - ZIP	
TITLE	<b>TV</b>	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROGERS, BRUCE J.</b>	2.2 NAME	
STREET ADDRESS	<b>720 SW 2ND AVE #258</b>	2.3 STREET ADDRESS	<b># 405</b>
CITY - ST - ZIP	<b>GAINESVILLE FL</b>	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.073(4), 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 as an attachment with an address.

SIGNATURE: *[Signature]* DATE **1/19/95** **904 8719847**  
(Type in Block 1)