FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **M98213** **(5)**

1. Corporation Name
COE, DUERR, MCIVER, SMITH & CAREY, M.D.'S, P.A.

Principal Place of Business	Mailing Address
5150 BAYOU BLVD., SUITE 2-H PENSACOLA FL 32503	5150 BAYOU BLVD., SUITE 2-H PENSACOLA FL 32503-2161

3. Date Incorporated or Qualified: 09/13/1988
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 5151 North 9th Avenue
22 Suite, Apt. #, etc.
23 City & State: Pensacola, FL
24 Zip: 32504 25 Country: Escambia

2a. Mailing Address
26 P.O. BOX 11184
27 Suite, Apt. #, etc.
28 City & State: PENSACOLA, FL
29 Zip: 32524-1184 30 Country: FL

4. FEI Number: 59-2904727 ☐ 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
PETER MCIVER
5150 BAYOU BLVD.
SUITE 2-H
PENSACOLA FL 32503

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 416 Montrose Blvd
83
84 City: Gulf Breeze, FL 85 Zip Code: 32561

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, JAMES R. 5150 BAYOU BLVD. #2-H PENSACOLA FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCIVER, PETER K. 5150 BAYOU BLVD. #2-H PENSACOLA FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	416 Montrose Blvd Gulf Breeze, FL 32561	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUERR, ANN E. 5150 BAYOU BLVD. #2-H PENSACOLA FL	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	7406 Camale Drive Pensacola, FL 32504	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COE, HENRY W. 5150 BAYOU BLVD. #2-H PENSACOLA FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAREY, DANNY L 5150 BAYOU BLVD #2-H PENSACOLA FL	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	5682 Meadowlark Circle Milton, FL 32570	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/96)

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: _____ 4/25/97