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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P04838 (9) 1. Corporation Name DR. J. TOM PEURIFOY, JR., M.D., P.A., INC.  Principal Place of Business Mailing Address 1884 59TH ST. W. BRADENTON FL 34209 BRADENTON FL 34209 BRADENTON FL 342094630						
PHINDHION F	* = 1200	Principal and a second at	<b>-</b>		3. Date Incorporated or Qualified 3a.	Date of Last Report
					01/30/1985 02	2/23/1996
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number 64-0638336	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
2] 27]						Fee Required
City & Stat	City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	iry	8. This corporation has liability for intangito	
24}	25	29	30		Ftorida Statutes Yes	
DE 1	9. Name and Address of Curr	ent Registered Agent		Name	10. Name and Address of New Registers	d Agent
PEURIFOY, DR. J. TOM JR. 216-81ST WEST					dress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34209					iress (P.O. Box Number is Not Acceptable)	
			]1	B3		
			Ī	34 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida State	utes, the abi	ove-named cor		
office or r	registered agent, or both, in the Sta am familiar with, and accept the ob	ite of Florida, Such change was	authorized	by the corporates	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE		g				
	Signature, typed or printed name of registered			Agent signature requ	uired when reinstaling) DATE	
12.	PD OFFICERS A	ND DIRECTORS  DELETE	13.	E T	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
NAME	PEURIFOY, DR. J. TOM JR.		12 NA			
STREET ADORESS	216-81ST WEST		1.3 STR	EET ADDRESS		
CHY-S1-7IP	BRADENTON FL		1.4 CIT	Y-ST-ZIP		
JI <sub>L</sub> I £	STD	DELETE	2.1 TITL	- 1		Change Addition
NAME STREET ADDRESS	HASS, MARK 2101 MANATEE AVE.W		2.2 NAM	i		
CHY-SI-ZIF	BRADENTON FL		F	EET ADDRESS Y-ST-ZIP	* #	
Title	< T A	☐ DELETE	3 1 TITL	<del></del>		Change Addition
NAME	Rad AA V. PE	KriFoy	3.2 NAM	AE		
STREET ADDRESS	1 (884 2477 21	<i>'</i>	3.3 STR	EET ADDRESS		
COTY - S1 - ZIP	Bordenton, F	<u> </u>		Y-ST-ZIP		Gh
THEF		U DELETE	4.1 TiTL	1		Change Addition
NAME CHACT ADDRESS	1		4.2 NA	ME EET ADDRESS		
STREET ADORESS CITY+ST-ZIP						
TILE		DELETE	DELETE 5.1 TITLE			Change Addition
NAME			5.2 NAM 5.3 STRE			
STREET ADDRESS						
CITY - S1 - 7IP				Y-ST-ZIP		
3HLE		☐ DELETE	6.1 TITI			Change Addition
NAME ON OTA ASSESSED			6.2 NA			
				1		
	Leby certify that the information supp	lied with this filing does not our			ed in Section 119.07(3)(i). Florida Statutes. I furti	her certify that the
information Lancan c	on indicated on this annual report of	r supplemental annual report is or the receiver or trustee empe	6.4 CIT alify for the e s true and ac owered to ex	ocurate and the	ed in Section 119.07(3)(i), Florida Statutes. I furti at my signature shall have the same legal effect ort as required by Chapter 607, Florida Statutes	as if made under o

SIGNATURE:

**FILED** 

Apr 16 1997 8:00am

Secretary of State