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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P04838

(9)

DR. J. TOM PEURIFOY, JR., M.D., P.A., INC.

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					,		DIN OLDAN SIDAK BADAN BADA	
1894 S9TH ST. W. BRADENTON FL 34209		1884 S9TH ST. W. BRADENTON FL 34209				DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualified		
					<u></u>	01/30/1985		
_	lace of Business	2a. Mailing Address				4. FEI Number		plied For
21		28				64-0638336		t Applicable
Suite, Apt.		27				5. Certificate of Status Desired	□ \$8.75 / Fee Re	
City & State		28 City & St				Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	¬ '			8. This corporation owes or has paid the current year intangible		angible
24	25 29 30 30 9, Name and Address of Current Registered Agent		0	Personal Property Tax due June 30. Yes No] No		
	9, Name and Address of Currer	nt Registered Age	nt			10. Name and Address of New Regis	tered Agent	
	JRIFOY, DR. J. TOM JR.			81	Name			ļ
	H81ST WEST ADENTON FL 34209				Street A	ddress (P.O. Box Number is Not Acceptable)		
5.1	00000			63				
				84	Í		FLI	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 ag-		(NOTE: F		nt signature r		DATE	
TITLE		ID DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR Change	S IN 12 Addition
NAME	PD PENDICAY DO A TOM ID	L) DELETE	1.1 TITLE				L Addition
	PEURIFOY, DR. J. TOM JR. 216-81ST WEST			1.2 NAME	4000000			Į
STREET ADDRESS CITY-ST-ZIP	BRADENTON FL			1.3 STREET				{
TITLE	STD		DELETE	1.4 CITY-S 2.1 TITLE	1-21		☐ Change	Addition
NAME	PEURIFOY, BRENDA V.	·		2.2 NAME				
STREET ADDRESS	1884 59TH ST W			2.3 STREET	ADDRESS			i
CITY-ST-ZIP	BRADENTON FL			2.4 CITY-5	1		, ,	1
TITLE	DIVIDENTION 12	1	DELETE	3.1 TITLE	91- ZW		Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			i
CITY-ST-ZIP				3.4. CITY-5				ĺ
TITLE		I	DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
NAME				4.2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S	T-ZIP			
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY-S	T-ZIP			
TITLE			DELETE	6.1 TITLE			☐ Change	Addition
NAME	•			6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-S				
14. I hereby c	ertify that the information supplied w	ith this filing does	not qualify for t	he exemp	tion stated	in Section 119.07(3)(i), Florida Statutes, I fur	ther 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:

T. PEUR, KOY