

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

**AND
FILED**

95 APR 18 PM 6:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P38314

(1)

1. Corporation Name

INTERIM PHYSICIANS, INC.

Principal Place of Business

**2050 SPECTRUM BLVD.
FT. LAUDERDALE FL 33309
US**

Mailing Address

**2050 SPECTRUM BLVD
FT LAUDERDALE FL 33309
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/14/1992

3a. Date of Last Report

04/12/1994

4. FEI Number

22-2493454

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

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **CD**
NAME **SOERSEN, ALLAN C.**
STREET ADDRESS **2050 SPECTRUM BLVD.**
CITY - ST - ZIP **FT. LAUDERDALE FL**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

33309

TITLE **PD**
NAME **MARCY, RAYMOND**
STREET ADDRESS **2050 SPECTRUM BLVD.**
CITY - ST - ZIP **FT. LAUDERDALE FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

33309

TITLE **SD**
NAME **SMITH, JOHN B**
STREET ADDRESS **2050 SPECTRUM BLVD**
CITY - ST - ZIP **FT LAUDERDALE FL**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

33309

TITLE **VT**
NAME **HAGGARD, PAUL**
STREET ADDRESS **2050 SPECTRUM BLVD.**
CITY - ST - ZIP **FT. LAUDERDALE FL**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

33309

TITLE **V**
NAME **BRICE, KENNETH P**
STREET ADDRESS **2050 SPECTRUM BLVD.**
CITY - ST - ZIP **FT. LAUDERDALE FL**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☒ Change ☐ Addition

**V/CD
DONALD W. AYERS
2050 Spectrum Blvd.
Fort Lauderdale, FL 33309**

TITLE **V**
NAME **LIVONIUS, ROBERT E.**
STREET ADDRESS **2050 SPECTRUM BLVD.**
CITY - ST - ZIP **FT. LAUDERDALE FL**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

33309

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 119.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental or dual 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:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Paul Haggard 4/11/95 305-938-7600