FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P92000014347 (8)

1. Corporation Name

FLORIDA MEDICAL QUALITY ASSURANCE, INC.

Principal Place of Business	Mailing Address
1211 N WESTSHORE BLVD SUITE 605 TAMPA FL 33607	1211 N WESTSHORE BLVD SUITE 605 TAMPA FL 33607

3. Date Incorporated or Qualified: 12/28/1992
3a. Date of Last Report: 04/17/1995

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

4. FEI Number: 59-3155017 ☐ 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

BARNETT, JENNIFER
1211 N WESTSHORE BLVD
SUITE 605
TAMPA FL 33607

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 ~~Jennifer Barnett~~ Error JB 4/24/96   ~~April 24, 1996~~ Error JB 4/24/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PAST	BARNETT, JENNIFER	1211 N WESTSHORE BLVD SUITE 605	TAMPA FL	☐
C	BRANCH, WILLIAM	1211 N WESTSHORE BLVD SUITE 605	TAMPA FL	☒ Error JB 4/24/96
VC	HODES, RICHARD	1211 N WESTSHORE BLVD SUITE 605	TAMPA FL	☐
T	OLLER, ROBERT	1211 N WESTSHORE BLVD SUITE 605	TAMPA FL	☐
S	LOCICERO, FELIX	1211 N WESTSHORE BLVD SUITE 605	TAMPA FL	☐
AT	LINDSEY, H. T	1 PERIMETER PARK SOUTH, SUITE 200 NORTH	BIRMINGHAM AL	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	AT (Asst. Treasurer)	Barnett, Jennifer	1211 N Westshore Blvd Suite 605	Tampa FL	☐	☒
2					☐	☐
3					☐	☐
4					☐	☐
5					☐	☐
6	AS (asst. Secretary)	Lindsey, H.T.	1 Perimeter Park South, Suite 200 North	Birmingham, AL	☒	☐

CR2E034 (12/95)

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)(k), 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: Barnett   Jennifer Barnett   4/24/96   (813) 281-9024
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #