

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 JUL -5 AM 9:02

DOCUMENT # P93000033044 (7)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

GEORGE M. STOREY, M.D., P.A.

Principal Place of Business

1762 MEADOWOOD ST
SARASOTA FL 34231
US

Mailing Address

1762 MEADOWOOD ST
SARASOTA FL 34231
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Out of State

05/03/1993

3a. Date of Last Report

03/08/1994

4. FEI Number

58-1559893

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

7. Does corporation have liability for employee fees under 5-119, Fla. Stat.,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Country

24. Zip

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Country

29. Zip

9. Name and Address of Current Registered Agent

STOREY, GEORGE M
1762 MEADOWOOD ST
SARASOTA FL 34231

10. Name and Address of New Registered Agent

01. Name

02. Street Address (P.O. Box Number is Not Acceptable)

03.

04. City

FL

05. 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 officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am hereby authorized to accept the resignations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required)

Signature of Registered Agent (Required)

(AT)

12. OFFICERS AND DIRECTORS

01. TITLE	D
02. NAME	STOREY, GEORGE M
03. STREET ADDRESS	1762 MEADOWOOD ST
04. CITY, ST, ZIP	SARASOTA FL
05. TITLE	S
06. NAME	STOREY, MAURICE W
07. STREET ADDRESS	1762 MEADOWOOD ST
08. CITY, ST, ZIP	SARASOTA FL
09. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

01. TITLE	☐ Change ☐ Addition
02. NAME	
03. STREET ADDRESS	
04. CITY, ST, ZIP	
05. TITLE	☐ Change ☐ Addition
06. NAME	
07. STREET ADDRESS	
08. CITY, ST, ZIP	
09. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is accurately prepared and does not conflict with the information stated in Section 510.07(1)(b), 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 in person with that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an officer or director with an address.

SIGNATURE:

MAURICE W. STOREY, Sec

6/29/95 813925-1424