

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 # P93000041176 (7)

1. Corporation Name

RICHARD M. COWIN, D.P.M., P.A.



Principal Place of Business

**9151 POINT CYPRESS DR.
ORLANDO FL 32836
US**

Mailing Address

**9151 POINT CYPRESS DR
ORLANDO FL 32836
US**

3. Date Incorporated or Qualified

06/10/1993

3a. Date of Last Report

05/25/1995

2. Principal Place of Business

2a. Mailing Address

21 5770 OKEECHOBEE BLVD.

26 5770 OKEECHOBEE BLVD.

4. FEI Number

65-0416474

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 WEST PALM BEACH, FL

28 WEST PALM BEACH, FL

Zip Country

Zip Country

24 33417

25

29 33417

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KRAMER, ROBERT M
4000 HOLLYWOOD BLVD
SUITE 485 SOUTH
HOLLYWOOD FL 33021**

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 title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**D
COWIN, RICHARD M
9151 POINT CYPRESS DR
ORLANDO FL**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

**1671 BRANDY WINE ROAD, APT. 2219
WEST PALM BEACH, FL 33409**

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Richard M. Cowin, DPM
Richard M. Cowin, DPM

3/9/96

407-876-1113

CR2E034 (12/95)