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

APPROVED AND FILED
95 MAY -1 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000088401 (3)

1. Corporate Name

THE EAR, NOSE THROAT & PLASTIC SURGERY ASSOCIATE S, P.A.

Principal Place of Business	Mailing Address
201 N. LAKEMONT AVE. SUITE 100 WINTER PARK FL 32792	201 N. LAKEMONT AVE. SUITE 100 WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/09/1993	3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3213724	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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

HO, HENRY N MD
201 N. LAKEMONT AVE.
SUITE 100
WINTER PARK FL 32792

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
V	COLEMAN, JOHN A JR	950 LINCOLN CR.	WINTER PARK FL
T	HOWERY, STEPHEN E MD	717 BALMORAL RD.	WINTER PARK FL
P	HO, HENRY N MD	3806 KINSLEY PLACE	WINTER PARK FL
V	SALATICHM, DALE	1700 LUCERNE TERRACE	ORLANDO FL
D	KIELMOVITCH, IZAK H MD	1893 WINGFIELD DR.	LONGWOOD FL 32779
S	TAGGART, JOHN P MD	2525 OAK ISLAND POINTE RD.	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY ST ZIP	Change	Addition
1	V	LEHMAN, JEFFREY J.	2888 OLD CASTLE DRIVE	WINTER PARK, FL	☐	☒
2	V	POPE, GEORGE H.	4843 BACKACHER LANE	~~ORLANDO, FL~~	☐	☒
3					☐	☐
4					☐	☐
5					☐	☐
6					☐	☐

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)(i), 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: Stephen E Howery — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 (Date)   (407) 644-4283 (Daytime Phone #)

Stephen E Howery MD

0047604 CP