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FILED

May 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000088743 (8)

1. Corporation Name

MARK J. VANDENBOSCH, M.D., P.A.

Principal Place of Business

225 S. TROPICAL TRAIL  
803  
MERRITT ISLAND FL 33176  
US

Mailing Address

225 S. TROPICAL TRAIL  
803  
MERRITT ISLAND FL 32952-4879  
US

2. Principal Place of Business

21 553 Rio Casa Dr. N.  
Suite, Apt. #, etc.

22

City & State  
23 Indialantic FL

Zip  
24 32903

Country

25

2a. Mailing Address

26 553 Rio Casa Dr. N.  
Suite, Apt. #, etc.

27

City & State  
28 Indialantic FL

Zip  
29 32903

Country

30

9. Name and Address of Current Registered Agent

VANDENBOSCH, MARK J  
8761 S.W. 148TH ST.  
MIAMI FL 33176

3. Date Incorporated or Qualified

12/30/1993

3a. Date of Last Report

06/12/1996

4. FEI Number

05-0450890

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

10. Name and Address of New Registered Agent

81 Name

VandenBosch, Mark J.

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

553 Rio Casa Dr. N.

83

84 City

Indialantic

FL

85 Zip Code

32903

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

Mark VandenBosch

5-5-97

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D  
NAME  
VANDENBOSCH, MARK J  
STREET ADDRESS  
8761 S.W. 148TH ST.  
CITY-ST-ZIP  
MIAMI FL 33176

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D  
NAME  
VandenBosch, Mark J.  
1.2 NAME  
553 Rio Casa Dr. N.  
1.3 STREET ADDRESS  
Indialantic FL 32903  
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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:

Mark VandenBosch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-5-97

Date

407-676-4700

Daytime Phone #

CR2E034 (9/96)