## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000088743 (8)

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

Country

9. Name and Address of Current Registered Agent

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VANDENBOSCH, MARK J 553 RIO CASA DR N

INDIALANTIC FL 32903

Principal Place of Business Mailing Address 553 RIO CASA DR N 553 RIO CASA DR N INDIALANTIC FL 32903 INDIALANTIC FL 32903 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0459890 Not Applicable Suite, Apt #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28

30

Country

81 Name

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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE VANDENBOSCH, MARK J NAME 1.2 NAME 553 RIO CASA DR N STREET ADDRESS 1.3 STREET ADDRESS INDIALANTIC FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Addition TIFLE 2 1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STAFFT ADDRESS CITY - S1 - ZIP 2 4 City - St - ZiP DELETE Addition TETLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELFTE Chance Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY - ST - ZIP Table DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHTY-ST-ZIP 64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this hing 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 the and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the convocation or the receive or trustee employered 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 any adjusts.

SIGNATURE:

Mark Vanden Bosch

4-21-97

**FILED** 

Apr 30 1998 8:00am

Secretary of State

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

Yes

□ No

407-773-6619

CR2E034 (10/97)