PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPART Sandra B. Secretary DIVISION OF CO	Mortham of State	Mar 31 19 Secretar			
OCUMENT # <b>P94</b> Sorperation Name Susan J. Thomas, M.D., P	10000404 	69 (6)					
pipal Flage of Business	Mailing	J Adoress	·····	I HERITERI TIU INNI NIKII KANI OLIH BUMI		II: <b>Divit l</b> iiil	INII INI
sea Island Dr Te vedra beahc fl 32082		A ISLAND DR VEDRA BEAHC FL 3	2082-3734	3. Date Incorporated or Qualified	3a, Date	of Last Re	eport
	······			05/25/1994		3/1996	· 
Principal Place of Business	2a. Ma 26	iling Address		4. FEI Number 59-3248728			plied For t Applicable
State Apt #, etc.	Sui	te, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A	dditional
laty & State	27 C-ty 28	y & State		<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>	[]	\$5.00 Added t	May Be
2 p Country	Zip		Country 30	8. This corporation has liability for i		ix under s. No	199.032,
25 9. Name and Address	29 of Current Registere			Florida Statutes			·····
BALL, JOHN S			81 Name				<u> </u>
1 INDEPENDENT DR. SUITE 2600			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
JACKSONVILLE FL 32202			83				
office or tenistered agent or both in	the State of Florida, S	Such change was au	thorized by the cornora	poration submits this statement for the p ation's board of directors. I hereby accep	FL purpose of c	85 Zip C hanging its ntment as	s registered
office or registered agent, or both, in agent 1 cm Iamiliar with, and accept NATURE Structure type or protections of	i the State of Florida. S the obligations of, Se	Such change was au otion 607.0505, Flor	s, the above-named cor	ation's board of directors. I hereby accep	DATE	hanging its	s registered registered
office or registered agent, or both, in agent 1 em Emiliar with, and accept NATURE Squalate by storgesterouse of OFFI D THOMAS, SUSAN J M	i the State of Florida. S the obligations of, Se teget, and agen and the it app CERS AND DIRECTOR	Such change was au ction 607.0505, Flor licane (NOTC RS	s, the above-named con ultrorized by the corpora ida Statutes. Registered Agent signature requ 13.	ation's board of directors, 1 hereby accep	DATE	hanging its ntment as	s registered registered S IN 12
office on registered agent, or both, in agent 1 em Lamit ar with, and accept MATURE Squadow type torgeted open of OFFI THOMAS, SUSAN J M 156 SEA ISLAND DR	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor Incare (NOTE RS DELETE	s, the above-named con ultrorized by the corpora- rida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors, 1 hereby accep	DATE DATE DATE	hanging its ntment as DIRECTOR Change	s registered registered S IN 12
Thee or registered agent, or both, in agent 1 em Lamit ar with, and accept 141URE 5 gradue type register toge of OFFI D THOMAS, SUSAN J M 156 SEA ISLAND DR	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor licane (NOTC RS	s, the above-named con- ultrorized by the corpora- rida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ation's board of directors, 1 hereby accep	DATE DATE DATE	hanging its ntment as	s registered registered S IN 12
Anno Contragistered agent, or both, in againt 1 em Tamit ar with, and accept NATURE Structure to composite register register register OFFI THOMAS, SUSAN J M 156 SEA ISLAND DR PONTE VEDRA BEACH	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor Incare (NOTE RS DELETE	s, the above-named con- ultiorized by the corpora- rida Statutes. Repistered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ation's board of directors, 1 hereby accep	DATE	hanging its ntment as DIRECTOR Change	s registered registered S IN 12
Pflice or registered agent, or both, in agent 1 em Taniit ar with, and accept IATURE Standow 1/2 of the providence of OFFI THOMAS, SUSAN J M 156 SEA ISLAND DR PONTE VEDRA BEACH 14008:55	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor Incare (NOTE RS DELETE	s, the above-named com ultiprized by the corpora- rica Statutes. Repistered Agent signature requinant 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as DIRECTOR Change	s registered registered S IN 12
Pflice or registered agent, or both, in agent 1 em Tamit ar with, and accept IATURE Structure to compare of OFFI THOMAS, SUSAN J M 156 SEA ISLAND DR PONTE VEDRA BEACH 1808:05 51.2P	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Buch change was au chan 607.0505, Flor INOTE RS DELETE	s, the above-named com ultrorized by the corpora- rida Statutes. Repistered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as	s registered registered S IN 12 Addition
ADDR::5     ADDR::5     ADDR::5     ADDR::5     ADDR::5     ADDR::5	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE	s, the above-named con ultrorized by the corpora ida Statutes. Repistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as	s registered registered S IN 12 Addition
ADDR::5     ADDR::5     ADDR::5     ADDR::5     ADDR::5     ADDR::5	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Buch change was au chan 607.0505, Flor INOTE RS DELETE	s, the above-hamed com ultionized by the corpora- ida Statutes. Registered Agent signature requinance <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as	s registered registered S IN 12 Addition
office on registered agent, or both, in a gant 1 am familian with, and accept NATURE Structure for organized to environmentation OFFI THOMAS, SUSAN J M 14008:55 51,26 1 ADDR:55 51,26 1 ADDR:55 51,26 1 ADDR:55	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE	s, the above-named com ultrorized by the corpora- rida Statutes. Reposered Agent signature requinations 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as	s registered registered S IN 12 Addition
office or registered agent, or both, in agent 1 em familiar with, and accept NATURE Squador factor prototioner in OFT  THOMAS, SUSAN J M 156 SEA ISLAND DR 156 SEA ISLAND DR PONTE VEDRA BEACH I ADDR 55 ST 20	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE	s, the above-hamed con- ultionized by the corpora- ida Statutes. Registered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging its ntment as	s registered registered S IN 12 Addition
office or registered agent, or both, in agent 1 am Lamit an with, and accept of Filler 1 am Lamit an with, and accept of Filler 1 and a ccept of Filler 1	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-hamed con- ultionized by the corpora- ida Statutes. Registered Agent signature requination in the corpora- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging it hanging it ntment as	s registered registered S IN 12 Addition
office or registered agent, or both, in agent 1 am Ismit ar with, and accept NATURE Synaktics gradient agent in protectioner into OFFI THOMAS, SUSAN J M 156 SEA ISLAND DR 156 SEA ISLAND DR PONTE VEDRA BEACH 14008155 51 ZP 14008155 51 ZP 14008155 51 ZP 14008155 51 ZP 14008155 51 ZP	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-hamed conjultorized by the corporation statutes. Projectered Agent signature requinance requinance requinance and statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ation's board of directors, 1 hereby accep	DATE DATE ERS AND C	hanging it hanging it ntment as	s registered registered S IN 12 Addition
office or registered agent, or both, in agent 1 em familiar with, and accept OFFI Structure for accept or	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au ction 607.0505, Flor RS DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-hamed conjultorized by the corporation of the second agent algorithms in the second sec	ation's board of directors, 1 hereby accep	DATE DATE DATE DATE DATE	hanging it hanging it ntment as	s registered registered S IN 12 Addition
office or registered agent, or both, in agent 1 em familiar with, and accept OFFI agent 1 em familiar with, and accept OFFI OFFI ADDR 5 stradeer tyret or protectioner into OFFI 100000000000000000000000000000000000	i the State of Florida. S the obligations of, Se legel ed agecard in it ap CERS AND DIRECTO	Such change was au chan 607.0505, Flor RS DELETE DELETE DELETE	s, the above-hamed conjultionized by the corporation statutes. Projectered Agent signature requinance requires requi	ation's board of directors, 1 hereby accep	DATE DATE DATE DATE DATE	hanging it nament as	s registered registered S IN 12 Addition Addition
office or registered agent, or bath, in agent 1 am Emiliar with, and accept OF I Standow target or protothouse int OF I THOMAS, SUSAN J M 156 SEA ISLAND DR PONTE VEDRA BEACH PONTE VEDRA BEACH 1 ADDR 15 51 20 1 ADDR 15 1 ADDR	The State of Florida. Set the obligations of, Set the obligations of, Set equal and the state of the set and CERS AND DIRECTOR	Such change was au chan 607.0505, Flor RS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE UDELETE UDELETE UDELETE	s, the above-hamed con- ultionized by the corpora- ical Statutes. Registered Agent signature requinance <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 7.1 TITLE 7.1 TITLE	ation's board of directors, 1 hereby accep	DATE DATE DATE DATE DATE DATE DATE DATE	hanging it hanging it ntment as	s registered registered S IN 12 Addition Addition Addition Addition