

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

FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000044136 (7)**

1. Corporation Name
ROY E. CROMER M.D., P.A.



Principal Place of Business 30 20TH STREET ATLANTIC BEACH FL 32233	Mailing Address 30 20TH STREET ATLANTIC BEACH FL 32233
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2227 Cordels Canyon Dr. Suite, Apt. #, etc. 22 City & State 23 Grand Junction, CO Zip Country 24 81503 25 MESA		2a. Mailing Address 26 2227 Cordels Canyon Dr. Suite, Apt. #, etc. 27 City & State 28 Grand Junction, CO Zip Country 29 81503 30 MESA		3. Date Incorporated or Qualified 06/09/1994	4. FEI Number 59-3248749 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 owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent

**GREEN, SUZANNE W
3010 SOUTH THIRD ST SUITE A
JACKSONVILLE BEACH FL 32250**

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
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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 transferring)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☒ DELETE		11 TITLE	D	☒ Change ☐ Addition	
NAME	CROMER, ROY E MD			12 NAME	Cromer, Roy E. M.D.		
STREET ADDRESS	30 20TH STREET			13 STREET ADDRESS	2227 Cordels Canyon Dr.		
CITY-ST-ZIP	ATLANTIC BEACH FL 32233			14 CITY-ST-ZIP	Grand Junction, CO 81503		
TITLE		☐ DELETE		21 TITLE		☐ Change ☐ Addition	
NAME				22 NAME			
STREET ADDRESS				23 STREET ADDRESS			
CITY-ST-ZIP				24 CITY-ST-ZIP			
TITLE		☐ DELETE		31 TITLE		☐ Change ☐ Addition	
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		☐ DELETE		41 TITLE		☐ Change ☐ Addition	
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		☐ DELETE		51 TITLE		☐ Change ☐ Addition	
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		☐ DELETE		61 TITLE		☐ Change ☐ Addition	
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

14. I 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:

Roy E. Cromer

1/15/98 9702459655

CR2E034 (10/97)