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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000060507 (8)

DOCUMENT # 1. Corporation Name

W.	BARTON	EDWARDS,	M.D.,	P.A.
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Principal Place of Business Mailing Address						INIO BRIAN BRING BIRIN 58 1	DI BINGI BENIN NEKI NE	
400 W. 11TH STREET SUITE -C PANAMA CITY FL 32401			400 W. 11TH STREET PANAMA CITY FL 32401		NTE -C			
						3. Date Incorporated or Qualified 08/10/1994	3a. Date of Last	Report /1995
2. Principal Pla	ace of Business	├ ¬	lailirig Address			4. FEI Number		Applied For
Suite, Apt #	l etc	26	uto Act # ato			59-3259272		Not Applicable
22	., 610.	27	urte, Apt. #, etc.			5. Certificate of Status Desired		75 Additional
City & State			ity & State		······	6. Election Campaign Financing		e Required
23		28				Trust Fund Contribution		00 May Be ded to Fees
Ζιρ	Country	Z1	b	Cou	ntry	8. This corporation has liability for in		
24	25	29		30	·	Florida Statutes	□No	
	9. Name and Address of Cur	rrent Hegister	ed Agent			10. Name and Address of New Ro	egistered Agent	
EDWA	DDC W D			İ	81 Name			
-0300	rds, w B Ienks ave				82 Street Add	dress (P.O. Box Number is Not Acceptable	e;	
	MA CITY FL -32405				400	W. 11th St., Sw	tec	
I ARM	MA CITT PL 32403				63	,		
				ļ	84 City		85	Zuo Code
11. Pursuant to	the provisions of Sections 607 O	502 and 607 to	508 Florid's Statutos			oration submits this statement for the purp	<u> </u>	32401
or registera	ed agent, or both, in the State of F	Inrida Such ch	ange was authorized	d by the c	orporation's bo	oration submits this statement for the purp and of directors. I nereby accept the appo	iose of changing its intment as registeri	s registered offici ed agent. Lam
familiar with	1. And accept the obligations of S							
familiar with	n, and accept the obligations of, S	icction 607.050	b, Florida Statutes.					
familiar with	 and accept the obligations of, S Specific by a ciprocara is chegological. 						Towns	
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SIGNATURE	OFFICERS D D EDWARDS, W B 400 W. 11TH STREET	AND DIRECTO	eler POIE	13. 1 1 11 1 2 NA	Agent signar in Technol ICE	ed where recreating	CERS AND DIRECT	··
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redo hereby certify that the information indicated on this principle is sequentarily turnshed and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes: I further certify that the information indicated on this principle report or supplemental annual report is frue and abcurate 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 chapted, or on an attachment with an artifices.

SIGNATURE:

4-15-96