(RECORD NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 1, 1995.
AMOUNT DUE ON OR BEFORE 5/1/95: $225 (IF DISSOLVED; MINIMUM AMOUNT DUE TO REINSTATE: $625)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 22 AM 9:57

DOCUMENT # **P94000076986 (6)**

1. Corporation Name

FLORIDA MEDICAL MANAGEMENT, INC.

Principal Place of Business	Mailing Address
46 N WASHINGTON BLVD #1 SARASOTA FL 34236	46 N WASHINGTON BLVD #1 SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/17/1994**
3a. Date of Last Report: **N/A**

2. Principal Place of Business
21 **1001 9th AVE. W.**
22 Suite, Apt. #, etc.
23 City & State: **BRADENTON, FL**
24 Zip: **34205** 25 Country: **USA**

2a. Mailing Address
26 **P.O. Box 1030**
27 Suite, Apt. #, etc.
28 City & State: **Bradenton, FL**
29 Zip: **34206** 30 Country: **USA**

4. FEI Number: **65-0528063** ☐ 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

7. Is this corporation filing for an eligible tax under s. 193.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PATTERSON, JOHN
46 N WASHINGTON BLVD #1
SARASOTA FL 34236

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

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D, XX Change ☐ Addition
NAME	PATTERSON, JOHN	12 NAME	BARBERIO, ALLAN J.
STREET ADDRESS	46 N WASHINGTON BLVD #1	13 STREET ADDRESS	1858 RINGLING BLVD.
CITY-ST-ZIP	SARASOTA FL 34236	14 CITY-ST-ZIP	SARASOTA, FL 34236
TITLE		21 TITLE	D ☐ Change XX Addition
NAME		22 NAME	MILES, WILLIAM G.
STREET ADDRESS		23 STREET ADDRESS	1858 RINGLING BLVD.
CITY-ST-ZIP		24 CITY-ST-ZIP	SARASOTA, FL 34236
TITLE		31 TITLE	P ☐ Change XX Addition
NAME		32 NAME	KING, JEFFREY L.
STREET ADDRESS		33 STREET ADDRESS	1001 9th AVE. W.
CITY-ST-ZIP		34 CITY-ST-ZIP	BRADENTON, FL 34205
TITLE		41 TITLE	VP ☐ Change XX Addition
NAME		42 NAME	BAUMANN, CHARLES R.
STREET ADDRESS		43 STREET ADDRESS	1858 RINGLING BLVD
CITY-ST-ZIP		44 CITY-ST-ZIP	SARASOTA, FL 34236
TITLE		51 TITLE	S ☐ Change XX Addition
NAME		52 NAME	GEBHARD, H. DIETER
STREET ADDRESS		53 STREET ADDRESS	1858 RINGLING BLVD.
CITY-ST-ZIP		54 CITY-ST-ZIP	SARASOTA, FL 34236
TITLE		61 TITLE	T ☐ Change XX Addition
NAME		62 NAME	HOFFNER, DALE R.
STREET ADDRESS		63 STREET ADDRESS	1858 RINGLING BLVD.
CITY-ST-ZIP		64 CITY-ST-ZIP	SARASOTA, FL 34236

14. I do hereby certify that the information supplied with this filing is voluntarily furnished 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 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: _____ 4/13/95 (813) 746-4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JEFFREY L. KING, President

CR2E034 (3/95)

011618 CP