Apr-29-97 04:37P 941

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May 08 1997 8:00am
Secretary of State

FILE NOW: FILING FEE AFTE.. MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # P95000054836 (8)

1. Corporation Name

J. TERRY PETRELLA, M.D., P.A.

Principal Place of Business

5741 BEE Ridge Rd Fourth FL.
SARASOTA, FL 34233

Mailing Address

5741 BEE Ridge Rd 4th FL
SARASOTA, FL 34233

3. Date Incorporated or Qualified: 07/13/1995

3a. Date of Last Report:

4. FEI Number: 65-0595624

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 has liability for corporate tax under s. 199.032, Florida Statutes: ☑ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip / Country
24 / 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip / Country
29 / 30

9. Name and Address of Current Registered Agent:

PETRELLA, JUDITH T. MD
5741 BEE Ridge Road FOURTH Floor
SARASOTA, FL 34233

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 607.1506, 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 individual agent and title if applicable — DATE

(NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE: D
NAME: PETRELLA, JUDITH T. M.D.
STREET ADDRESS: 5741 BEE Ridge ROAD FOURTH Floor
CITY-ST-ZIP: SARASOTA FL 34233

☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP

☐ Change ☐ Addition
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

DW 5-8-97

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***165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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: J.T. Petrella M.D.