

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000059987 (4)

1. Corporation Name

THE CLINICIANS GROUP, P.A.



Principal Place of Business

2100 E BAY DR  
SUITE 205  
LARGO FL 34641

Mailing Address

2100 E BAY DR  
SUITE 205  
LARGO FL 34641

3. Date Incorporated or Qualified  
08/03/1995

3a. Date of Last Report  
not applicable

2. Principal Place of Business

21 1909 Seagull Drive

Suite, Apt. #, etc.

22 City & State

23 Clearwater, Florida

24 Zip 34624

25 Country Pinellas

2a. Mailing Address

26 1909 Seagull Drive

Suite, Apt. #, etc.

27 City & State

28 Clearwater, Florida

29 Zip 34624

30 Country Pinellas

4. FFI Number

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 intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FILINGS, INC.  
3732 NW 16 ST  
FT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name  
Alysia Sasha Ross, M.S.  
82 Street Address (P.O. Box Number is Not Acceptable)  
1909 Seagull Drive  
83  
84 City  
Clearwater FL 85 Zip Code  
34624

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 *Alysia Sasha Ross, M.S., President*

3/01/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
D	ROSS, AYSIA S	2100 E BAY DR SUITE 205	LARGO FL 34641	<input type="checkbox"/>
D	ECCELLENTE, DALE E	2100 E BAY DR SUITE 205	LARGO FL 34641	<input checked="" type="checkbox"/>
D	JAMES, JACK C	2100 E BAY DR SUITE 205	LARGO FL 34641	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
/President	Ross, Alysia Sasha	1909 Seagull Drive	Clearwater, Florida 34624	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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\*\*\*200.00

PM 5-1-96

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: *Alysia Sasha Ross, M.S., President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/01/96

813-531-1351

Display Phone #

CR2E034 (12/95)