

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

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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000078914 (5)

1. Corporation Name

AMERICAN MEDICAL PARTNERSHIP, INC.

Principal Place of Business

5000 PINWOOD AVENUE
JACKSONVILLE FL 32257

Mailing Address

5000 PINWOOD AVENUE
JACKSONVILLE FL 32257-1224



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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29

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9. Name and Address of Current Registered Agent

HINDMAN, ROGER WAYNE
5000 PINWOOD AVENUE
JACKSONVILLE FL 32257

3. Date Incorporated or Qualified

10/11/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3340576

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

81 Name

VICKI-LYNNE FLOGER

82 Street Address (P.O. Box Number is Not Acceptable)

8739 SAN SOSE BLVD.

83

JACKSONVILLE

84 City

FL

85 Zip Code

32217

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 and 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 not a shareholder, officer, director, or agent of the corporation, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: X Vicki-Lynne Floger

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. NAME
2. TITLE
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