

FEB. 05 1997

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May 02 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 # P96000004712 (1)

1. Corporation Name
BRUCE O'GRADY M.P.C., INC.



Principal Place of Business
8759 LAND O'LAKES BLVD
LAND O'LAKES FL 34639

Mailing Address
7522 N 40TH STREET
TAMPA FL 33604-4504

3. Date Incorporated or Qualified 01/04/1996 3a. Date of Last Report

2. Principal Place of Business 21 6747 Land O'Lakes Blvd 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 4. FEI Number 59-3353013 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 10. Name and Address of New Registered Agent

SHORT, PAUL R
7522 N 40TH STREET
TAMPA FL 33604

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

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	1.1 TITLE	PD
NAME	O'GRADY, BRUCE	1.2 NAME	O'Grady, Bruce
STREET ADDRESS	8759 LAND O'LAKES BLVD	1.3 STREET ADDRESS	6747 Land O'Lakes Blvd
CITY-ST-ZIP	LAND O'LAKES FL 34639	1.4 CITY-ST-ZIP	Land O'Lakes, FL 34639
TITLE	VSD	2.1 TITLE	VSD
NAME	O'GRADY, PAMELA J	2.2 NAME	O'Grady, Pamela J
STREET ADDRESS	8759 LAND O'LAKES BLVD	2.3 STREET ADDRESS	6747 Land O'Lakes Blvd
CITY-ST-ZIP	LAND O'LAKES FL 34639	2.4 CITY-ST-ZIP	Land O'Lakes, FL 34639
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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. 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 [Signature] 4-15-97 81400/01121

CR2E034 (9/96)