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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000044999 (6)

SOUTHWEST FLORIDA PULMONARY SPECIALISTS, P.A.

Principal Place of Business

Mailing Address

FILED Mar 20 1998 8:00am Secretary of State



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24 Second Property Tax due June 30	Zip	Country		Country							
D'AGOSTINO, LOUIS D 4501 TAMAMI TRAIL NO. STE 300 NAPLES FI. 33940 82 Stroet Address (P.O. Box Number is Not Acceptable) 83 Sunt Address (P.O. Box Number is Not Acceptable) 84 City NAPLS 11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Fior da Statutes. The adversarial corporations submited this atternant for the purpose of changing its registered egent. I arm familiar with, and accept the appointment as registered egent. I arm familiar with, and accept the objective of the objective of the appointment as registered egent. I arm familiar with, and accept the objective of the	24 3410		1201 20 10	OSA		Personal Propert	ty Tax due June	30.	Yes [- ·	
## District Addition			941.1		10. Name and Add	ress of New Re	gistered	Agent			
NAPLES FL 33940 NAPLES FL 33940 11. Pursuant to the provisions of Soctions 507,0502 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 Statutes, the above-named corporation's board of identities. It hereby accept the appointment as registered office or registered agent, and accept, the obligations of, Soction 607,0506, Florida Statutes. SIGNATURE Signature what or private or private or garded that applicable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILL OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. AMPLE AND ALL		- ·	D'A	CHITEOUT	LOUIS >	_					
South Colors South Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered egent. I am femiliar with, and accept the obligations of, Scotion 607 0505, Florida Statutes. SIGNATURE		82 Street Address (P.O. Box Number is Not Acceptable)									
11. Pursuant to the provisions of Sccions 607 (5002 and 607 15008, fibrid a Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, socion 607 (5005, Florida Statutes). SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE DELETE 1.2 TITLE DELETE 1.3 STREET ADDRESS 6032 SOUTHAMPTON CIRCLE 1.3 STREET ADDRESS CITY-ST-2P TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.3 STREET ADDRESS CITY-ST-2P TITLE DELETE 3.4 STREET ADDRESS CITY-ST-2P TITLE DELETE 3.5 STREET ADDRESS CITY-ST-2P Change Addition ADDRESS CITY-ST-2P Change Addition Change Change Change Change Change Change		83									
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 may familiar with, and accept, the obligations of, Section 607 (Socion, Florido Statutes). SIGNATURE Signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SPORN, GARY K DR. STREET ADDRESS 5032 SOUTHAMPTON CIRCLE TAMMP 13. STREET ADDRESS 6032 SOUTHAMPTON CIRCLE 13. STREET ADDRESS CITY-ST-ZPP 14. CITY-ST-ZPP 14. CITY-ST-ZPP 14. CITY-ST-ZPP 15. TITLE				84 City	7	ARRS		FL	85 Zip (Code 102	
SIGNATURE Signature types for protect agent aircl this any viscable. (NOTI deglatered Agent airpenture regulered squent regule	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 objection 607.0505, Florida Statutes, the appointment as registered agent.										
Signature Spring to private name of registers appeal and this in any sectation. (NOTION registered Agent alignature required when retriatency)	=	. 1		Ja Statutes.						_	
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14. I 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.

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