

P96000063875

Steven Boudreau  
Requestor's Name

96 JUL 26 AM 9 18

104 Lakeside Colony  
Address

SECON  
TALLAH

Larson Springs, FL  
City/State/Zip

Phone #

34689

4000 01891254  
-07/16/96--01051--020  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #) W96-14972
4. Client is aware of similar name in same city.  
(Corporation Name) (Document #)  
They want to continue with the filing.

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
**Secretary of State**

July 18, 1996

**STEVEN BOUDREAU**  
**104 LAKESIDE COLONY DRIVE**  
**TARPON SPRINGS, FL 34689**

**SUBJECT: GULFCOAST CLINICAL RESEARCH, INC.**  
**Ref. Number: W96000U14972**

We have received your document for GULFCOAST CLINICAL RESEARCH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name you are trying to file is similar to an existing entity, also located in Clearwater. Enclosed is a computer printout of the similar name. If you want to alter your name to make it more distinguishable, make the substitution in all appropriate places.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

**Kathy Hyman**  
**Document Specialist**

**Letter Number: 096A00034751**

STATE OF  
FLORIDA  
ARTICLES OF INCORPORATION  
OF  
GULF COAST CLINICAL RESEARCH, INC.  
A BUSINESS/STOCK CORPORATION

The name of the corporation is GULF COAST CLINICAL RESEARCH, INC.

The business and mailing address of the corporation is 602 GREENWOOD AVENUE SOUTH  
CLEARWATER, FLORIDA 34616  
(street address, city, county, state, zip)

The duration of the corporation is perpetual.

The corporation has been organized to transact any and all lawful business for which corporations may be incorporated in this state.

The aggregate number of shares which the corporation shall have the authority to issue is 1000 and the par value of each share is NO PAR VALUE. (typically "no par value")

The number of directors constituting the initial board of directors of the corporation is 2 and their names and addresses are: STEVEN LEE BOUDREAU, President  
104 LAKESIDE COLONY DRIVE  
TARPON SPRINGS, FLORIDA 34689  
GUY LEPIVE, Vice President  
15225 US HWY 19 N  
HUBBARD, FLORIDA 34667

The location and street address of the initial registered office is 602 GREENWOOD AVENUE SOUTH  
CLEARWATER, PINELLAS COUNTY, FLORIDA 34616 (must be located within the state; if not county also)  
and the name of its initial registered agent at such address is STEVEN LEE BOUDREAU

The name and address of each incorporator: STEVEN LEE BOUDREAU, President  
GUY LEPIVE, Vice President  
15225 US HWY 19 N  
HUBBARD, FL 34667  
104 LAKESIDE COLONY DRIVE  
TARPON SPRINGS FLORIDA 34689

In witness thereof, the undersigned incorporator(s) have executed these articles of incorporation this 10 day of July, 1996.

Witness

JANICE CANTIE

Witness

CHRISTINA E. BROWN

Incorporator

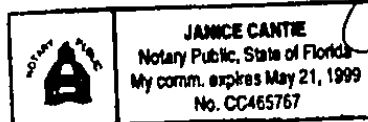
Incorporator

State of FLORIDA  
County of PINELLAS

On July 10, 1996, the above person(s) appeared before me, a notary public and are personally known or proved to me to be the person(s) whose name(s) is/are subscribed to the above instrument who acknowledged that he/she executed the instrument.

Notary

(Notary stamp or seal)



This document prepared by:

STEVEN L. BOJORCIAN

Consent of Appointment by the Registered Agent

I, STEVEN BOJORCIAN, hereby give my consent to serve as the registered agent for

(name of registered agent)

Cellular Research, Inc.

(corporate name)

Dated July 10, 1996.

St Bl

(signature of registered agent)

Articles prepared by:

FILED  
96 JUL 26 AM 9 18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA