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FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000104420 (0)

1. Corporation Name

MARY W. MONACO, P.A.



Principal Place of Business

Mailing Address

~~2210 N.W. 40TH TERRACE~~
~~SUITE A~~
~~GAINESVILLE FL 32606~~

4707 N.W.
53rd Avenue,
Suite A
Gainesville, FL
32606

P.O. BOX 147050
GAINESVILLE FL 32614

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1996

4. FEI Number

59-3416053

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 4707 N.W. 53rd Avenue

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite A

City & State

23 Gainesville, FL

Zip

24 32606

Country

Zip

29

Country

30

9. Name and Address of Current Registered Agent

MONACO, MARY W
2210 N.W. 40TH TERRACE-
SUITE A
GAINESVILLE FL 32605

10. Name and Address of New Registered Agent

81 Name

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

4707 N.W. 53rd Avenue

83 Suite A

84 City Gainesville

FL

85 Zip Code 32606

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

Mary W. Monaco
Signature, typed or printed name of authorized agent and title if applicable.

Mary W. Monaco
(NOTE: Registered Agent signature required when reinstating)

9-12-98
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MONACO, MARY W.

STREET ADDRESS 2210 N.W. 40TH TERRACE, SUITE A

CITY - ST - ZIP GAINESVILLE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

4707 NW 53rd Avenue, Suite A
Gainesville, FL 32606

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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.

SIGNATURE

Mary W. Monaco

Mary W. Monaco 3/12/98

352-373-
8999

CR2E034 (10/97)