

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Aug 07 1998 8:00am  
Secretary of State

DOCUMENT # P97000052458 (1)

1. Corporation Name  
ATLANTIC FAMILY MEDICAL CENTER, INC.



Principal Place of Business  
9350 S DIXIE HIGHWAY SUITE 1220  
MIAMI FL 33156

Mailing Address  
CONSOLIDATED MEDICAL CENTERS, INC.  
P.O. BOX 330007  
ATLANTIC BEACH FL 32233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1997

4. FEI Number

65-0764958

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 13155 Atlantic Blvd.

Suite, Apt. #, etc.

City & State

23 Jacksonville, FL

Zip

24 32225

Country

25 Duval

2a. Mailing Address

26 P.O. Box 330909

Suite, Apt. #, etc.

City & State

28 Atlantic Bch., FL

Zip

29 32233

Country

30 Duval

9. Name and Address of Current Registered Agent

AZ REGISTERED AGENT CORPORATION  
2601 S BAYSHORE DR SUITE 1600  
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

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

B&C Corporate Services, Inc.

83 201 S. Biscayne Blvd. Suite 3000

84 City

Miami

85 Zip Code

FL 33131

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

Anna Salgado, Vice President

Anna Salgado, Vice President

July 31, 1998

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE Director  
NAME Jeffrey I. Binder  
STREET ADDRESS 9350 S. Dixie Hwy., Ste. 1220  
CITY-ST-ZIP Miami, FL 33156

TITLE Director/Vice President  
NAME Larry E. Jones  
STREET ADDRESS 2605 Maitland Cntr Pkwy, Ste 300  
CITY-ST-ZIP Maitland, FL 32751

TITLE Director/President  
NAME Stephen L. Silverberg, MD  
STREET ADDRESS 13155 Atlantic Blvd.  
CITY-ST-ZIP Jacksonville, FL 32225

TITLE Dir./Sec. & Treas.  
NAME Blanca Santos  
STREET ADDRESS 9350 S. Dixie Hwy., Ste 1220  
CITY-ST-ZIP Miami, FL 33156

TITLE VP  
NAME Victor Micolucci, MD  
STREET ADDRESS 11513 N. Main St.  
CITY-ST-ZIP Jacksonville, FL 32218

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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-08/17/98--01137--031  
\*\*\*550.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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

Blanca Santos

7/24/98

305-670-3405

CR2E034 (5/98)