## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

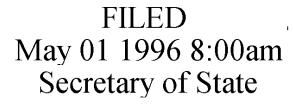
S55164

(5)

MARK A. HORTON, M.D., P.A.

Principal Place of Business

Mailing Address





820 PRUDENTIAL DRIVE SUITE 713 JACKSONVILLE FL 32207					820 PRUDENTIAL DRIVE SUITE 713 JACKSONVILLE FL 32207					Date Incorporated or Qualifie	nd   3a	Date of Las	St Benod		
										07/01/1991	Ju. 1		8/1995		
	2. Principal Place of Business					ess				4. FEI Number			Applied For		
21					26					59-3076779			Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired			.75 Additional ee Required		
City & State					City & State 28					6. Election Campaign Financing Trust Fund Contribution	<u> </u>		.00 May Be ded to Fees		
Zip 24	Country				Zip Cou 29 30			itry		8. This corporation has liability for intangible tax under s 199,032, Florida Statutes  No					
24]			ddress of Current		tered Agent		301			10. Name and Address of New Registered Agent					
	••							B1	Name						
HORTON, MARK A., M.D.									6						
820 PRUDENTIAL DRIVE SUITE 713								82	Street /	Address (P.O. Box Number is Not Accep	tablej				
								83							
JACKS					84	City			85	Zip Code					
11. Pursuant to	the provision	ns of	Sections 607 0502 a	nd 60	7.1508. Florid	a Statutes	the abov	 e-n	amed co	proporation submits this statement for the			its registered office		
or registere	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	ionature lyrind n	or orinter	financi of registered agent ar	o litte it a	ared: able	/Note	Registered A		1 signature te	equired when reinstating)	DAT				
12.			OFFICERS AND				13.	<u> </u>		ADDITIONS/CHANGES TO C			CTORS IN 12		
TITLE	PTS				DEL	ETE	1 1 117	L E	1			Chan	ge 🔲 Addition		
NAME	HORTON, MARK A.				1.2 N			ΛE	)				Ì		
STREET ADDRESS 820 PRUDENTIAL DR, #713							1.3 STR	EET.	ADDRESS						
CITY-ST-ZIP	JACKS	<u> </u>	ILLE FL				1.4 CiT	y - \$1	T-ZIP		- · · · · · · · · · · · · · · · · · · ·				
TITLE					☐ DEL	ETE	2. 1 111	LE				☐ Chan	ge 🔲 Addition		
NAME					2.2 N			AE.							
STREET ADDRESS								EET.	ADDRESS )				Ì		
CITY-ST-ZIP			<del></del> -						T - ZIP			F7 01	5.46		
TITLE						DELETE 3 11						Chan	ige 🔲 Addition		
NAME							3.2 NAN								
STREET ADDRESS									ADDRESS						
CITY-ST-ZIP TITLE	<del> </del>				[7] DEL	FIF	3.4 CIT		1 · ZIP			[ ] Chan	ige		
NAME							4.2 NAM						ago		
STREET ADDRESS									ADDRESS						
CITY-ST-ZIP							4.4 CITY		- 1						
TITLE			<del></del>		☐ DE1	ETE	5 1 1)1	_			· · · · · · · · · · · · · · · · · · ·	Chan	ige 🗍 Addition		
NAME							5.2 NAM					_	_		
STREET ADDRESS							5.3 STR	EET 4	ADDRESS						
CITY-ST-ZIP							5.4 CITY		- 1						
TITLE					☐ DEL	E1E	6. 1 TIT					☐ Chan	ge 🔲 Addition		
NAME							6.2 NAN	řE.	ļ				ļ		
STREET ADDRESS							6.3 STR	EET A	ADDRESS						
CITY-ST-ZIP							6.4 CITY								
and the beauties.				11. (1. )	All and the second conditions	- 9 4 5 1	1			C4 4 N C C C C C C C C C C C C C C C C C	40.07(0)03	Electric Of	- 1 - 4 1 - 4 4		

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.

810 9488866