

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

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # S55347**

1. Corporation Name  
**BAPTIST EYE INSTITUTE, P.A.**

Principal Place of Business Mailing Address  
**1235 SAN MARCO BLVD. JACKSONVILLE FL 32207**

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
23	City & State	27	City & State
24	Zip	28	Country
25	Country	29	Zip
30		30	Country

**9. Name and Address of Current Registered Agent**

**BOWDEN, FRANK III M  
1235 SAN MARCO BLVD.  
STE. 404  
JACKSONVILLE FL 32207**

81	Name	85	Zip Code
82	Street Address (P.O. Box Number is Not Acceptable)	FL	
83			
84	City		

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**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	1.1 TITLE	D
NAME	LEVENSON, JEFFREY H M.D	1.2 NAME	
STREET ADDRESS	1235 SAN MARCO BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	DP	2.1 TITLE	
NAME	BOWDEN, FRANK MD	2.2 NAME	
STREET ADDRESS	1235 SAN MARCO BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	DV
NAME	COLUCCELLI, GERARD, MD	3.2 NAME	
STREET ADDRESS	1235 SAN MARCO BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D
NAME	NICOLITZ, ERNST MD	4.2 NAME	Simmons, Richard L
STREET ADDRESS	1235 SAN MARCO BLVD.	4.3 STREET ADDRESS	1235 San marco Blvd
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	Jacksonville Fl
TITLE	DS	5.1 TITLE	D
NAME	SHMUNES, NEIL MD	5.2 NAME	
STREET ADDRESS	1235 SAN MARCO BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	TS
NAME	ADAMS, CHARLES JR. M	6.2 NAME	Seeman, Naomi
STREET ADDRESS	1235 SAN MARCO BLVD.	6.3 STREET ADDRESS	1235 San marco Blvd.
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP	Jacksonville FL

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-07/27/99--01046--008  
\*\*\*150.00 \*\*\*150.00

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. 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, with all other like empowered.

**SIGNATURE:**

*Frank W. Bowden* 6/29/99

FILED

05/23/1999 AM 11:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**05/23/1991**

4. FEI Number  
**59-3080348**

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 the current year Intangible Personal Property Tax.  Yes  No

10. Name and Address of New Registered Agent

0000027

CR2E034 (11/98)



# Baptist Eye Institute, P.A.

*Focusing on Eye Care Excellence*

1235 San Marco Boulevard • Jacksonville, Florida 32207 • 904/393-2020

June 29, 1999

Florida Department of Revenue  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Re: Corporation Annual Reports for:  
Baptist Eye Institute, P. A. (59-3080348)  
Focused Management, Inc. (59-3373003)

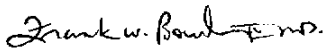
To Whom It May Concern:

Enclosed please find the Corporation Annual Reports for the above captioned corporations along with checks for \$150.00 for each report. It is respectfully requested that the late fees be abated for reasonable cause. The practice administrator, Naomi Seeman, has been on extended leave of absence due to illness since April 1999. The CPA's delivered the packages containing the Annual Reports with filing instructions and marked the envelopes Confidential. It was only recently that the packages were opened.

There was no willful intent not to timely file the Corporation Annual Reports. Therefore, your favorable consideration in this request is requested.

Please let me hear from you soon.

Sincerely,

  
Frank W. Bowden, III, M. D.  
President

Frank W. Bowden III, M.D.      Gerard A. Coluccelli, M.D.      Jeffrey H. Levenson, M.D.  
Neil T. Shmunis, M.D.      Richard L. Simmons, M.D.

Northside • Southside • Riverside • Beaches • Orange Park • Fernandina Beach

**Eye Care Physicians to the Jacksonville Jaguars**