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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

563697

DELRAY EYE ASSOCIATES, P.A.

Principal Place of Business

## FILED Mar 31 1998 8:00am Secretary of State



Mailing Address 16201 SOUTH MILITARY TRAIL 16201 SOUTH MILITARY TRAIL **DELRAY BEACH FL 33484** DELRAY BEACH FL 33484 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1808240 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Country Country Zip  $Z_{ip}$ 8. This corporation owes or has paid the current year Intangible Yes □ No 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LITINSKY, STEVEN M 16201 S MILITARY TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33484** 83 84 City 85 Zip Code 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 reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE 1.1 TITLE Change TITLE LITINSKY, STEVEN M 12 NAME NAME 16201 S MILITARY TRAIL STREET ADDRESS 1.3 STREET ADDRESS DELRAY BCH, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE **SNYDER, DAVID A** NAME 2.2 NAME STREET ADDRESS 16201 S MILITARY TRAIL 2.3 STREET ADDRESS DELRAY BCH, FL 00000 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ROSENFELD, STEVEN I. NAME 3.2 NAME 16201 S MILITARY TRAIL STREET ADDRESS 3.3 STREET ADDRESS **DELRAY BCH FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE ☐ Change Addition JAN W. KRONISH 4. 2 NAME NAME 16201 S. MILITARY TRAIL 4.3 STREET ADDRESS STREET ADDRESS DELRAY BOH FL 4.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 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.

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME **6.3 STREET ADDRESS** 

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

1. 198

☐ Change

Addition