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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 605998

(4)

EVA S. LAUKHUF, M.D., P.A.

FILED
Jan 31 1997 8:00am
Secretary of State

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Principal Place	e of Business	Mailing Addre	:5\$			i (Batis Piti Séin aine Inie iale iale eini eini aini aith aith aith aith aith aith aith ait				
2221 59TH ST. WEST BRADENTON FL 34209-7017		2221 59TH ST. BRADENTON F	WEST L 34209-7017							
						Date Incorporated or Qualified     01/03/1979	3a. Date 04/23		eport	
2. Principal P	lace of Business	2a. Mailing Ad	idress			4. FEI Number	1		plied For	
21		26				59-1870348		No	t Applicable	
Suite, Apt.	#, etc	Suite, Apt.	#, etc.			Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & State	e	City & Stat	te			6. Election Campaign Financing		\$5.00	May Re	
23		28	28			Trust Fund Contribution	Added to Fees			
Zıp	Country	Z(p		Country	/	8. This corporation has liability for	njangible ta:	under s.	199.032,	
24	25	29	30	<u> </u>			Yes 🔲	No		
	9. Name and Address of Cu	rrent Registered Agen	it			10. Name and Address of New Re	Istered Ag	ent		
YAN	GER, WILLIAM H.,JR.			81	Name					
	SUITE 1625, EXCHANGE BANK BLDG.					treet Address (P.O. Box Number is Not Acceptable)				
	PA FL			82	Oliver Aud	riesa (r. O. Box Normber la Not Neceptad	10)			
.,				83			· · · · · · · · · · · · · · · · · · ·			
				84	City		FL	<b>85  </b> Zip≀	Code	
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. Flo	orida Statutes	the abov	re-named cor	poration submits this statement for the p		ancino it	s registered	
office or r	registered agent, or both, in the S im familiar with, and accept the o	State of Florida. Such ch	ange was auth	orized b	y the corpora	ation's board of directors. I hereby accep	t the appoin	tment as	registered	
agentia	im ramiliar with, and accept the d	ongations of, Section 60	37.0305, Florid	a Statute	5.					
SIGNATURE	Signature, typed or printed narise of registere	d agent sud tilla it applicable	INOTE: D	naistand An	ent einsalurs res	ured when reinstating)	DATE	<del> </del>	-	
12.		AND DIRECTORS	(NOTE A	13.	en e	ADDITIONS/CHANGES TO OFFIC		BECTOR	S IN 12	
TITLE	PD		DELETE	1.1 TITLE		7.551101001010101010		Change	Addition	
NAME	LAUKHUFF, EVA	<del></del>		1.2 NAME						
STREET ADDRESS	9405 17THAVE NW				T ADDRESS					
	BRADENTON FL				1					
CITY-ST-ZIP	DANDERTOR FE		DELETE	1.4 CHY- 2.1 TITLE	51-ZIP		<del></del>	Change	Addition	
THILE		LJ	Dicere				<b>!</b>	T CHRUND		
NAME				2.2 NAME						
STREET ADDRESS					T ADDRESS					
City - SF- ZIP			DELETE	2. 4 CITY-	ST-ZIP			Change	Addition	
TITLE			DELETE	3.1 TITL€			L	) cuande	LJ AUGILION	
NAME				3.2 NAME						
STREET ADDRESS					T ADDRESS					
C(TY - ST - ZIP				3.4. CITY-	ST-ZIP			1 4	1 4 1 191	
TITLE		اا	DELETE	4 1 TITLE	]		L.	Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				43 STREE	T ADDRESS					
CITY - ST - ZIP				4.4 CITY-	ST-ZIP		h		<u>purp</u>	
TITLE			DELETE	5 1 TITLE			L.	Change	Addition	
NAME				5 2 NAME						
STREET ADDRESS				53 STREE	T ADDRESS					
CITY-S1-ZiP				5.4 CITY-	ST-ZIP					
TITLE			DELETE	6.1 THTLE				Change	Addition	
NAME				6.2 NAME						
STREET ADDRESS			Ì		T ADDRESS					
1				6.4 CHTY-						
CITY-ST-ZiP	1			0.4 UHT*	01*ZfF	11 5 c 445 67/0/// FC 11 50 //				

14. I do 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 on 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 flock 13 if chartest on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIDNING OFFICER OR DIRECTO

Daytime Phone #