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FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # F97000000778 (7)

1. Corporation Name
DIVERSIFIED THERAPY CORP.

Principal Place of Business	Mailing Address
~~777 S. FLAGLER DR~~ ~~WEST PALM BEACH FL 33401~~ 4237 SALISBURY RD. SUITE 308 JACKSONVILLE, FL 32216	~~777 S. FLAGLER DR~~ ~~WEST PALM BEACH FL 33401~~ ← SAME

DO NOT WRITE IN THIS SPACE

21 Principal Place of Business	2a. Mailing Address 26	3. Date Incorporated or Qualified: 02/13/1997	
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number: 65-0675277	☐ Applied For ☐ Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
24 Zip / 25 Country	29 Zip / 30 Country	6. Election Campaign Financing Trust Fund Contribution ☐	**$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	

9. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
ONE SE THIRD AVE, 28TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MACHER, JOEL 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	CHAIRMAN OF BOARD AMOS ALMAND, III 4237 SALISBURY RD., STE 308	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAUL, JOSEPH 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	PRESIDENT/CEO JAMES F. H. HENRY 4237 SALISBURY RD, STE 308 JACKSONVILLE, FL 32216	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WHITE, STEVEN 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SECRETARY WILLIS, F. SPENCE 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☐ DELETE	4.1 TITLE / 4. 2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	SAME	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MACELT, KIM 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	ASST SECRETARY JUDY GREEN 4237 SALISBURY RD, STE 308 JACKSONVILLE, FL 32216	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T TURNER, STEVE 777 S. FLAGLER DR WEST PALM BEACH FL 33401	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	REESE WALTER 4237 SALISBURY RD., STE 308 JACKSONVILLE, FL 32216 TREASURER ←	☒ Change ☐ Addition

CR2E034 (10/97)

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.

SIGNATURE: [signature] JAMES F. H. HENRY 2/4/98 904-296-4536