

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

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **J19580** (6)

1. Corporation Name

**TALLHASSEE CARDIOPULMONARY REHABILITATION AND FITNESS CENTER, INC.**

Principal Place of Business

1401 CENTERVILLE ROAD  
BOX 210  
TALLHASSEE FL 32308  
US

Home Address

1401 CENTERVILLE ROAD  
BOX 210  
TALLHASSEE FL 32308  
US

RECEIVED  
MAY 15 1995  
SECRETARY OF STATE  
TALLHASSEE, FLORIDA

DATE OF NEXT REPORT

3. Date of Current Report  
**06/17/1986**

3a. Date of Last Report  
**08/19/1994**

4. Telephone  
**59-2688897**

Appointed Fee  
Paid Application

5. Certificate of Status Requested

**\$8.75 Additional Fee Required**

6. Has the Corporation Made any  
Paid Fund Contribution

**\$5.00 May Be Added to Fees**

7. Has the Corporation Made any  
Florida Contribution  Yes  No

2. Previous Report Year

2a. Mailing Address

21. State Agent #

27. State Agent #

22. City, State

28. City, State

23. City, State

29. City, State

24. City, State

25. City, State

30. City, State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUCHANAN, JOHN D JR  
117 S GADSDEN ST  
TALLHASSEE FL 32301**

81. Name

82. State Agent #

83. City, State

84. City, State

**FL**

85. City, State

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above is a true and correct copy of the information required by this report, and that the same is true and correct to the best of my knowledge and belief.

12. Name

**D  
MOORE, DUNCAN  
1300 MICCOSUKEE RD  
TALLHASSEE FL**

13. Name

**D  
GIUDICE, WILLIAM  
1300 MICCOSUKEE RD  
TALLHASSEE FL**

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

13. Name

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above is a true and correct copy of the information required by this report, and that the same is true and correct to the best of my knowledge and belief.

SIGNATURE: **William A. Giudice**

April 25, 1995 (904) 681-5238