## 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 # K57907

(3)

RICHARD T. WEISENBURGER, D.O., P.A.

FILED
May 01 1998 8:00am
Secretary of State



| Principat Plac  | ce of Business                        | Mailing Address                                | Mailing Address      |   | 1 10010111 201 01111 10010 10111 10010 10111 1001 0101 1001          | 4 reginist bet ditti 10010 jakk dötti 4001 dibil 4101 åldi. Glist dibil 4101 åldi. |  |
|---|---------------------------------------|--|----------------------|---|--|--|--|
| 790 S.E. 5TH TERRACE<br>CRYSTAL RIVER FL 34429  |                                       | 790 S.E. 5TH TERRACE<br>CRYSTAL RIVER FL 34429 |                      |   |  |  |  |
|   |                                       |  |                      |   |  | DO NOT WRITE IN THIS SPACE   |  |
|   |                                       |  |                      |   | 3. Date Incorporated or Qualified 01/01/1989                         |  |  |
|   | Place of Business                     | 2a, Mailing Address                            | 2a. Mailing Address  |   | 4. FEI Number  | Applied For  |  |
| 21  |                                       | 26   |                      |   | 59-2924429   | Not Applicable   |  |
| Suite, Apt. #, etc.   |                                       | Suite, Apt. #, etc.                            | <b>—</b>             |   |  | 8.75 Additional<br>Fee Required  |  |
| City & State  |                                       | City & State                                   |                      |   | 6. Election Campaign Financing                                       | \$5.00 May Be  |  |
| 23  | 28                                    |  |                      |   | Trust Fund Contribution  | Added to Fees  |  |
| Zip   | Country                               | Zip  | Cour                 | ntry  | 8. This corporation owes or has paid the curren                      |  |  |
| 24  | 25                                    |  | 30                   |   | Personal Property Tax due June 30.                                   |  |  |
| Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent   |                                       |  |                      |   |  |  |  |
| WEISENBURGER, RICHARD, D.O.P.A.   |                                       |  |                      | 81 Nam  | ne   |  |  |
| 790 S.E. 5TH TERRACE<br>CRYSTAL RIVER FL 34429  |                                       |  | H                    | 82 Street Address (P.O. Box Number is Not Acceptable) |  |  |  |
|   |                                       |  | - 1                  | 01.0  | or Address (F.O. Box Normber is Not Acceptable)                      |  |  |
|   |                                       |  | [7                   | 83  |  |  |  |
|   |                                       |  |                      |   |  | ,  |  |
|   |                                       |  | - 1                  | 84 City   |  | 5 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   |                                       |  |                      |   |  |  |  |
| 12.   |                                       | ND DIRECTORS                                   | 13.                  | ⇒Derk aıÖıler   | ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DI | DECTORS IN 10  |  |
| TITLE   | Р                                     | DELETE   | 1.1 TEL              | F   |  | Change Addition  |  |
| NAME .  | WEISENBURGER, RICHARD                 | <del></del> -                                  | 1.2 NA               |   |  | Oriente  |  |
| STREET ADDRESS  | 790 SE 5TH TERRACE                    | •  |                      | eet addres  |  |  |  |
| CITY-ST-ZIP   | CRYSTAL RIVER FL                      |  |                      | Y-ST- <i>2</i> IP                                     | 3  |  |  |
| TITLE   | VP                                    | ☐ DELETÉ                                       | 2.1 TITE             |   |  | Change   |  |
| NAME  | GRILLO, DENIS W                       | 23 00072                                       | 2.2 NAN              |   | <u> </u>   | Change   Mudition  |  |
| STREET ADDRESS  | 790 SE 5TH TERRACE                    |  |                      | EET ADDRES  | .  |  |  |
| CITY-ST-ZIP   | CRYSTAL RIVER FL                      |  |                      |   | · [  |  |  |
| TITLE   | ONI OTAL MILLITE                      | ☐ DELETE                                       | 3.1 TITL             | Y-ST-ZIP  |  | Change Addition  |  |
| NAME  |                                       |  | 3.1 IIIL             |   |  | Change LI Addition !   |  |
| STREET ADDRESS  |                                       |  |                      |   | ,  | İ  |  |
| CITY-ST-ZIP   |                                       |  | •                    | EET ADDRESS   | ·  |  |  |
| TITLE   |                                       | DELETE   | 3.4. CIT<br>4.1 TITL | Y-ST-ZIP  | <u> </u>   | Change   |  |
| NAME  |                                       |  | 4. 2 NA              |   |  | Circlings T MOR((0))   |  |
| STREET ADDRESS  |                                       |  |                      |   |  |  |  |
| CITY-ST-ZIP   |                                       |  |                      | EET ADORESS   | 5  | İ  |  |
| TITLE   |                                       | DELETE   |                      | -ST-ZIP   |  | Observe T Lateries   |  |
| NAME  |                                       | LL DELETE                                      | 5.1 TITE             |   |  | Change   |  |
|   |                                       |  | 5.2 NAW              |   | <u>†</u>   | ]  |  |
| STREET ADDRESS  |                                       |  |                      | EET ADDRESS   | <sup>5</sup>   | f  |  |
| CITY-ST-ZIP   | · · · · · · · · · · · · · · · · · · · | - Dori cz                                      |                      | - ST - ZIP  |  |  |  |
| TITLE   |                                       | DELETE   | 6.1 TITL             |   |  | Change   |  |
| NAME  |                                       |  | 6.2 NAW              |   |  |  |  |
| STREET ADORESS  |                                       |  | 6.3 STR              | EET ADDRESS   | 3  |  |  |
| CITY-ST-ZIP   |                                       |  | 6.4 CITY             | -ST-ZIP   |  |  |  |

. 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 disceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or an attachment with an address.

SIGNATURE:

iland & flowerfuge

4-21-98

HZE034 (1097)