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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

POCUMENT # N28193

(3)

FILED
May 18 1998 8:00am
Secretary of State

Sist No. COSS/VELL RD _6019 P.O. BOX_SECURE PL _7019 P.O. BOX_SECURE PL _70295 COSES P.O. BOX_SECUR		al Health Systems of	BREVARD, INC.						
P.O. BOX SEQUER BOCKLEDGE FL 3295 US ROCKLEDGE FL 3295-0388 4. FET Number 59-2088075 Not Applicable 59-208075 Not Applicable 6-6-Required	Principal Place of Business Mailing Address							1 B(B() \$19()	41911 91911 1991
BOOKLEOGE FL 32955 BOOKLEOGE FL 3295-0098 S. Applied For Not Applied For						3. Date Incorporated or Qualified			
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2. Principal Place of Business 2a. Mailing Address 59-2908075 Not Applicate 21 26 26 27 28 27 29 27 27 29 20 27 29 20 29 20 29 20 29 20 20	L			HU300					Applied For
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20 20 20 20 20 20 20 20	23						∐ Yes 🖠	No.	
CUNNINCHAM, ROBERT H. 1535 N. COGSWELL SUTTE C-19 TOCKLEDGE FI. 32955 11. Pursuant to the provisions of Seglegas 647,0502 and 617,1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent, or body, in the bird of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or body, in the bird of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or body, in the bird of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or body, in the bird of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with, and adopts the pulpages of changing its registered agent. I am faciliar with a pulpage of changing its registered agent. I am faciliar with a pulpage of changing its registered agent. I am faciliar with a pulpage of changing its registered agent. I am faciliar with a pulpage of change as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am faciliar with a pulpage agent. I am faci	Zip	 	_ _	⊢	untry		_		
CUNNINGHAM, ROBERT H. 1S3S N. COGSWELL SUTIE C-19 ROCKLEDGE FI. 32955 11. Parauent to the conversaria of sections 52,050 and 517,1508, Florida Statute. III. Bis Statute. I	24	11		30					DEC! No
CUNNINCHAM, ROBERT H. 1835 N. COGSWELL SUITE C-19 20 Street Address (P.O. Box Number is Not Acceptable) 15:35 N. Cogswell 15:35 N. Cog	· · · · · · · · · · · · · · · · · · ·	w. Mame and Address of Curre	in riegistered Agent		81 Name	IV. Name and Address of New H	edistelen t	danı	
1535 N. COGSWELL SUITE C-19 ROCKLEDGE FL 32955 11. Pursuant to the Arrovishns of Sections 647 0:602 and 617 1508. Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I are required with problems of Section 617 0:503 Beritad Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D GARRISON, LARRY 4395 CROCKED MILE ROAD 13. SIRRET ADDRESS GITY-ST-2P TITLE D GARRISON C.E.O. 22 NAME BAKER, ROD C.E.O. 23 SIRRET ADDRESS TITUSVILLE FL D GELETE 11 TITLE D GELETE 11 TITLE D GELETE 11 TITLE D GRAMAN, ROBERT O. 33 SIRRET ADDRESS	Olemen	OUAL DODERT II							
SUITE C-19 ROCKLEDGE FL 32955 11. Pursuant to the provisions of Sections \$42,0502 and 617, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered object. In the prints of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed. I may be printed against a site approaches the prints when the pr					82 Street Add		able)		
ROCKLEDGE FL 32955 11. Pursuant to the provisions of Sections 647,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and account the pulphons of Sections 617,0502 period Statutes. SIGNATURE					83	1333 N. Cogswell			
11. Pursuant to the provisions of Sections 612,0502 and 617,1508, Florida Statutes, the above-merced corporation submits this statement for the purpose of changing its registered agent, or both, in the both of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and acoust the policylorins of, Section 617,0503, Berida Statutes. SIGNATURE Signature, Provide provide agent and title if applicable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D						Suite C-19			
11. Pursuant to the processors of Sections 647,0502 and 617,1508, Florids Statutes, the above-nemed corporation's submits this statement for the purpose of changing its registered office or registered again, or both, in the Settle of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familier with, and accept the dolighwons of. Section 617,0503 Elerida Statutes. SIGNATURE S	NOONLE	DOE PL 32800			84 City	Pools I odgo	FI	B5 Zi	p Code 3 2 9 5 5
SIGNATURE Signature Signa	11. Pursuant	to the provisions of Sections 647.05	02 and 617.1508, Florida Si	tatutes, the	above-named corp	poration submits this statement for the	purpose of		
SIGNATURE Signature Signa	office or re	egistered agent, or both, in the State m familiar with, and accept the dolo	a of Florida. Such change v	vas authoriz 3. Elerida Sta	ed by the corporat	tion's board of directors. I hereby acce	ept the appo	ointment .	as registered
Signature Part Dotter Prince of requisitered agent and ble if applicable (NOTE Registered Agent) signature required when renetating) 12. OFFICERS AND DIRECTORS		tonto 1	Madder	Joan	E. Madder	L.CEO	4/30	5/ 9i	8
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CITY-ST-ZIP COCOA FL 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									

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

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Son Julia Alexander

4/30/98 Date 407-633-7050 x113

Daytime Phone # 0020221