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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P94000045190 (3)**

1. Corporation Name
ONESOURCE HEALTH, INC.

Principal Place of Business	Mailing Address
2111 GLENWOOD DRIVE SUITE 103 WINTER PARK FL 32792 US	2111 GLENWOOD DRIVE SUITE 103 WINTER PARK FL 32792-3328 US

3. Date Incorporated or Qualified: 06/10/1994
3a. Date of Last Report: 07/17/1996
4. FEI Number: 59-3251684 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

CAROLAN, J P III
390 N ORANGE AVE, #1490
ORLANDO FL 32801

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BLALOCK, TULLY T MD		1.2 NAME	
STREET ADDRESS	1355 ORANGE AVE. 1		1.3 STREET ADDRESS	SEE
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CITY-ST-ZIP	ATTACHED
TITLE	D	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SWEDISH, JOSEPH R		2.2 NAME	
STREET ADDRESS	200 N LAKEMONT AVE.		2.3 STREET ADDRESS	SCHEDULE
CITY-ST-ZIP	WINTER PARK FL 32792		2.4 CITY-ST-ZIP	
TITLE	D	☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DOMINGUEZ, HUMBERTO MD		3.2 NAME	
STREET ADDRESS	70 FOX RIDGE COURT		3.3 STREET ADDRESS	
CITY-ST-ZIP	DEBARY FL 32713		3.4 CITY-ST-ZIP	
TITLE	D	☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	EVANS, RORY MD		4.2 NAME	
STREET ADDRESS	200 W. GORE ST.		4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32806		4.4 CITY-ST-ZIP	
TITLE	VCD	☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, ARNOLD DO		5.2 NAME	
STREET ADDRESS	802 W. OAK STREET		5.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34761		5.4 CITY-ST-ZIP	
TITLE	TD	☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ROGERS, WILLIAM D MD		6.2 NAME	
STREET ADDRESS	800 W. MORSE BLVD #5		6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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 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: G Elvis Woodard SIGNATURE REQUIRED 4/19/97 407-786-7850
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ONESOURCE HEALTH, INC.
PROFIT CORPORATION ANNUAL REPORT
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TITLE	NAME	STREET ADDRESS	CITY, STATE & ZIP CODE	ADDITION
DIRECTOR	WILLIAM ROGERS, JR.	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	BRUCE BREIT	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	MICHAEL BARIMO	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	FRANCIS COVELLI	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	LAWRENCE VALLARIO	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	HUMBERTO DOMINQUEZ	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	RORY EVANS	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	ALDEN SANBORN	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	ARNOLD MILLER	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	LEONARD WILKERSON	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	JOE SWEDISH	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	LEWIS SEIFERT	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
DIRECTOR	LYNN DICKS	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
PRESIDENT	A. ELENA HUNTER	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
VICE PRESIDENT	ARNOLD MILLER	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES
TREASURER	WILLIAM ROGERS, JR.	2111 GLENWOOD DRIVE, SUITE 103	WINTER PARK , FLORIDA 32792	YES