

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **383137** (7)
1. Corporation Name
**FLORIDA ASSOCIATION FOR PROFESSIONAL HYPNOSIS, I
NC.**



Principal Place of Business 107 GARDENIA PL HOWEY-IN-HILLS FL 34737 US	Mailing Address 107 GARDENIA PL. HOWEY-IN-HILLS FL 34737 US
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See Below

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7737 FAIRWAY CIRCLE Suite, Apt. #, etc. 22	2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 SAME City & State 28 SAME Zip 29 SAME Country 30 SAME	3. Date Incorporated or Qualified 05/28/1971	4. FEI Number 59-2178435 Applied For Not Applicable
City & State 23 LEESBURG, FL	City & State 28 SAME	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Zip 24 34788 Country 25 LAKE	Zip 29 SAME Country 30 SAME	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCCAWLEY JR, JOE B
615 IRVINGTON
ORLANDO FL 32803**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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	S <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLEIN, LAVERN N	1.2 NAME	
STREET ADDRESS	7321 VENTURA AVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	1.4 CITY - ST - ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY, JOHN E	2.2 NAME	
STREET ADDRESS	678 TUSCORORA DR	2.3 STREET ADDRESS	VA
CITY - ST - ZIP	WINTER SPRINGS FL	2.4 CITY - ST - ZIP	TODD, BUDDY
TITLE	P <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONARD, MARTHA S	3.2 NAME	
STREET ADDRESS	115 ALBERT'S AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	INTERLACHEN FL	3.4 CITY - ST - ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YAWMAN, EARL J	4.2 NAME	
STREET ADDRESS	107 GARDENIA PLACE	4.3 STREET ADDRESS	
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL	4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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.

EARL J. YAWMAN, TREAS.

CR2E034 (10/97)