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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 479801

(3)

RICHARD G. NORENBERG, M.D., P.A.

FILED
Mar 31 1997 8:00am
Secretary of State

Principal Plac	Principal Place of Business Mailing Address  603-77H ST. SOUTH  603-77H ST. SOUTH		T 18851) OLDIY 1886A 1858) 1861, Willer bian diant diant arten andis atan actur					
SUITE 340	NO EL 90304	Suite 340 St Petersburg Fl. 337	M 4304					
ST PETERSBUR	RG FL 33/01	US	UI 77/U7		3. Date Incorporated or Qualified	3a. Da	te of Last I	Report
-					06/30/1975	E	5/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u>.i<del>,,,,,</del></u>	TA	pplied For
21		26			59-1606327			ot Applicable
Suite, Apt	# etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75	Additional
22		27			5. Certificate of Status Desired		Fee F	lequired
City & State	е	City & State	City & State		6. Election Campaign Financing		\$5.00	May Be
23	was a same prompton and the same	28			Trust Fund Contribution		Added	to Fees
Zip	Country	Zφ	Countr	y	8. This corporation has liability for it			s. 199.032,
24	25 25 9. Name and Address of Curr	29	30		Florida Statutes  10. Name and Address of New Reg	Yes [		
		ent negistered Agent	B1	Name	IU. Name and Address of New Neg	Hatelen Y	rgent	
	RENBERG, RICHARD G.,M.D.		"	IVALITIE				
	7TH ST. SOUTH		82	Street A	ddress (P.O. Box Number is Not Acceptab	e)		
	E 340		63	1	· · · · · · · · · · · · · · · · · · ·			
ST	PETERSBURG FL 33701		63	Ì				
			84	City		<u></u>	<b>85</b> Zip	Code
				<u></u>		FL		
11. Parsuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607.1508, Florida Statu ite of Florida. Such change was	utes, the above authorized b	e-named on the corp.	corporation submits this statement for the proration's board of directors. I hereby accep	urpose of t the appo	changing sintment a	its registered s registered
agent La	irr familiar with, and accept the ob-	igations of, Section 607.0505, F	lorida Statute	8	, , , , , , , , , , , , , , , , , , , ,			
SIGNATURE								
12.	Signal or type a departed mark, of registiand	agent and title if applicable (NC ND DIRECTORS	TE: Registered Ag	ent signature r	required when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE EDC AND	DIDECTO	DC IN 12
TITLE	P	DELETE	1,1 TITLE	T	ADDITIONS/CHANGES TO OFFIC		X Change	Addition
	NORENBERG, RICHARD G	La Diccit					MET CHOOSE	
NAME	643-6TH AVENUE SOUTH		1.2 NAME		603 7th Street South;	C., 4 +	340	
STREET ADDRESS	ST PETERSBURG FL			T ADORESS				
C-TY-ST-ZIP TITLE	V	DELETE	1.4 CHTY- 2.1 TITLE	S1-ZIP	St. Petersburg, Florid	<u>u 33/</u>	Change	Addition
NAME	HYLER, JAMES E.		2.2 NAME				ondigo	
	AGGO COURT PINET LAC AVE							
STREET ADDRESS	TARPON SPRINGS FL	•		T ADDRESS				
CHY ST ZIP	IANFOR SPRINGS I E	DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP		<del></del>	Change	Addition
11°LE		LJ DECEIE	3.1 MILE 3.2 NAME				— Change	
NAME								
STREET ADDRESS				1 ADDRESS				
CHY-ST ZIP TITLE		DELETE	3.4. CITY-	21-715			Change	Addition
NAME		[ DEEE.)E	4. 2 NAM				Onange	
STREET ADDRESS				T ADDRESS				
Coffy - S1 - 7/P TITLE		DELETE	4.4 City- 5.1 Title	\$1- <i>E</i> IP			Change	Addition
		الما المالية					- Ollange	Rudillori
NAME CONTRACTOR			5.2 NAME	- 1				
STREET ADDRESS			1	I ADDRESS				
Cally ST ZIP		DELETE	5.4 CITY-	ST-ZIP			Change	Addition
Trief			6.1 TITLE				LICHANGE	MOIIION
NAME	1		6.2 NAME					
STREET ADORESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP		1 41	6.4 CITY-		and in Continue 440 07/07/07 Fig. 141- Co.	16.36		
14 Ldo bere	by certify that the information supp	tion with this filting does not bus	urv for the ex	emption st	ated in Section 119 07(3)(i) Florida Statutes	Lingher	certity the	n rne

4. 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 suppliemental 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 of 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 only attachment with an iddirect.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sharl 3

5-53-78-99