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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name JAMES WM. DICKEY, JR., M.D., P.A.

(4)

**FILED** Jan 15 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			1501 51511 51511 51511 51511
3625 COUNTY	Y ROAD 78 WEST	3625 COUNTY ROAD 78	WEST			
LABELLE FL 33935 US		LABELLE FL 33935 US				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					11/10/1975	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	F	g / tttl edd		59-1629767	Not Applicable	
Suite, Apt.	# atc	Suite, Apt #, etc.	l		39 1029707	
	₩, <b>Q</b> (C.		uite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<del>-</del>			
City & State	9	City & State	1		6. Election Campaign Financing	<b>\$5.00</b> May Be
23	28			Trust Fund Contribution	Added to Fees	
Zip	Country Zip		Country	4	8. This corporation owes or has paid the c	
24 25 29			30		Personal Property Tax due June 30.	☐ Yes ☐ No
Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent
DIC	CKEY JR, JAMES WILLIAM		81	Name		
	25 COUNTY ROAD 78 WEST		02	L	(200 B. M. C. I. N. C. C. I. N. C. C. I.	
	BELLE FL 33935		82	Street Au	dress (P.O. Box Number is Not Acceptable)	
	DELLE TE SOURCE		83	<del> -</del>		
						ļ
			84	City		■ 85 Zip Code
						L     `
11. Pursuant t	o the provisions of Sections 607.050	02 and 607.1508, Florida Statute	os, the abov	e named co	orporation submits this statement for the purpose ration's board of directors. Thereby accept the ap-	of changing its registered
acent. I ar	a <b>gistered age</b> nt, <b>or b</b> oth, in the State <b>m familiar with, and a</b> ccept the oblig	ว of Hohda, Such change was a pations of, Section 607 0505, Fic	autnorizeu bi arida Statute	y the corpora	ation's board of directors, i nereby accept the ap	ppointment as registered
SIGNATURE	Signature, typed or punied name of registered ag	eet and specif applicable (NOT)	: Ragistered Ag	ont signature req	pered when reinstating) DATE	
12,	<del></del>	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	I	7,007,10110,011,012,12	Change Addition
	DICKEY, JAMES WM., JR.		1.2 NAME			Li 0.13 tgt
NAME	AGGE COUNTY DOAD TO WEST					
STREET ADDRESS	LARCIECI			ADDRESS		
CITY-ST-ZIP	LABELLE FL		1.4 CITY - S	ST-7IP		···· • · · · · · · · · · · · · · · · ·
TITLE	V	☐ DELETE	2.1 TITLE			L. Change
NAME	DICKEY, JAMES WM., JR.		2.2 NAME			
STREET ADDRESS	3625 COUNTY ROAD 78 WE	ST	2.3 STREET	ADDRESS		
CITY-ST-ZIP	LABELLE FL		2.4 CITY-	\$1.7IP		
TITLE		DELETE	3.1 TITLE	31 211		Change Addition
NAME		<del></del>	3.2 NAME			L - V
i i						
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP			3.4 CHY-	SI-ZIP		
TITLE	DELETE		4.1 THLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CHY- 5	G . 74P		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME		<del>-</del> -	5.2 NAME			
1				1200100		
STREET ADDRESS			53 STREET	ſ		
CITY-ST-ZIP			5 4 CHTY - S	II - 74P		المرازين والمحجدات المستواحية
TITLE	•	☐ DELETE	6 1 TITLE			L_ Change L_ Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CHY-S	1		
14. I hereby co	ertify that the information supplied v	with this filing does not qualify fo	r the exemp	tion stated in	in Section 119.07(3)(i), Florida Statutes. I further of	certify that the information
Indicated of	on this annual report or supplement	al annual report is true and acci	urate and th	at my signat	ture shall have the same legal effect as if made t	under oath; that I am an 🔠
Officer or o	director of the corporation or the rec or Block 13 if changed, or on an atta	éiver or trustee empower <b>ea</b> to c rebreent with an address	execute this	report as red	quired by Chapter 607, Florida Statutes; and that	t my name appears in
DIOON 12 C	of Block 15 ir changed, or on an atta	ici interit with an acidless.	_		- 1	