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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 581421

(5)

RICHARD D. HOOVER, M.D., P.A.

2151 45TH STREET. #108

Block 12 or Block 13 if changed, or

an an attachment with an address

Principal Place of Business

Mailing Address

2151 45TH STREET. #108

FILED Feb 03 1998 8:00am Secretary of State



WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1978 Principal Place of Business 215-31 2a. Mailing Address 4. FEI Number Applied For Glencairn 59-1837239 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be 6. Election Campaign Financing Beach Gardeus, Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XI Yes □ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOOVER, RICHARD D. 2151 45TH STREET, #108 82 Strept Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33407-Kapa *lencairn* 83 84 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 apphiable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 PDS DELETE 1.1 TITLE **Change** Addition TITLE HOOVER, RICHARD D. NAME 1.2 NAME I Glencainu Road Palm Beach Gardens 2151-45TH STREET: #100 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BOH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP 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

Richard D Hower (V)