PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90105 038 \*\*\*150.00

DOCUMENT	#	CONDED
POCOMICIAL	π	OCCUUC

1. Corporado	MENT # 600858 In Name IN WILSON M.D., P.A.	3						
Principal Plac	e of Business	Mailing Address			- L statres deile barer deidt effet deite ibre some seine	artifert defiere i	erari árást i áði	
1341 ORANGE WINTER PARK		1341 ORANGE AVENUE WINTER PARK FL 32789						
10001231174111	,				DO NOT WRITE IN THIS SP	ACE		
					3. Date Incorporated or Qualified 02/28/1969			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	I Ar	plied For	]
21		26			59-1233146	<del></del>	t Apolicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 /	Additional	
City & Stat		City & State	<del>-</del>				May Be	
23		28	-	-	6. Election Campaign Financing Trust Func Contribution		to Fees	
Zip					8. This corporation owes the current year Intangible			
24	25	29 30	<u> </u>		T Gradital Topolity Taxi: /-		□No	
	9. Name and Address of Curre	nt Registered Agent	81	T W	10. Name and Address of New Registered Ag	ent		
wn s	SON.CECIL B.		01	Name				}
1341	ORANGE AVENUE		82	Street Add	ress (P.O. Box Number is Not Acceptable)			
Win	TER PARK FL 32789		83					
		•	84	City		85 Zip	Code	
			1	1	FL (			
-11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the obligation.	02 and 607.1508, Florida Statutes, of Florida. Such change was authorations of, Section 607.0505, Florida	the above orized by Statutes	e-named corporation.	coration submits this statement for the purpose of che on's board of directors. I hereby accept the appointm	anging iis entas re	gistered	
SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable. (NOTE Reg	pistered Agen	signature require	d when reinstating) DATE			8
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND I			(11/98)
TITLE	PD	☐ DELETE	1.1 TITLE	1		] Change	☐ Addition	
NAME	WILSON, CECIL B.		1.2 NAME					F034
STREET ADDRESS	1341 ORANGE AVENUE		1.3 STREET					7
CITY-ST-7P	WINTER PARK FL.	DELETE.	1.4 CITY-ST 2.1 TITLE	<u> </u>		Change	☐ Add tion	2
TITE	HUGHES.J. M.	Clogeic	2.2 NAME	Ì		1		
NAME STREET AUDRESS	1341 ORANGE AVENUE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	WINTER PARK FL	The second secon	2.4 CITY-S		والمراب المرازع فسيسد والاستنساس المسيد	<b>-</b> -	~ _	'
TITLE	Ť	☐ DELETE	3.1 TITLE			Change	Add tion	
NAME	WILSON, CECIL B.		32 NAME					
- STREET AL DRESS	_1341.ORANGE AVENUE		3.3 STREET	ADDRESS			<u> </u>	_
CITY-ST-ZP	WINTER PARK FL		3.4. CTTY-S	7-2IP		3 01	T 1 d d s s s	ĺ
TITLE		☐ DELETE	4.1 TITLE	Į	L	] Change	☐ Add tion	
NAME			4.2 NAME					
STREET AL ORIESS			4.3 STREET	Į.				
CITY-ST-ZP		☐ DELETE	4.4 CITY-S	r-ziP		Change	☐ Addition	
TITLE—			52 NAME			- •	_	
- NAME STREET ACORESS			5.3 STREET	ADDRESS				
CITY-ST-ZP			5.4 CITY-ST	I				
TITLE		☐ DELETE	6.1 TITLE			] Change	Addition	
NAME			6.2 NAME					ı
STREET ADDRESS	·		6.3 STREET	ADDRESS				
				-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3), 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 cath; 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, with all other like empowered.