FILE NOW: FILI	NG FEE AFTER	MAY 1 IS \$	550.00	A A	LED	0
PROFIT CORPORATION		FLORIDA DEPART		Jan 23 19	997 8:0	0am
ANNUAL REPORT 1997		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
DOCUMENT # 60 Corporation Name L. ED. FRUSH, D.D.S., P.A		(7)				
rincipal Place of Business	Maila	ig Address				UKUKI UKUKA Ukuki Ukuki Ukuki Ukuki
77 SOUTH TAMIAMI TRAIL IRASOTA FL 34239	2677 S	South tamiami trai Sota FL 34239-4504	ι			
				3. Date Incorporated or Qualified 06/24/1971	3a. Date of Last R 01/30/1996	eport
Principal Place of Business		ailing Address	<u></u>	4. FEI Number NOT APPLICABLE		plied For ot Applicable
L Sude, Apt. #, etc. 1		uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
City & State	27	ity & State	, 	6. Election Campaign Financing	\$5.00	
Zip Country	y Zij	<u>а</u>	Country	Trust Fund Contribution -8. This corporation has liability for		to Fees . 199.032,
9. Name and Addre	29 ss of Current Registere	······································	30	Florida Statutes	Yes KINO	
FRUSH, LEON			81 Name	<u>nt</u>		
2677 SO. TRAIL SARASOTA FL 34239			82 Street Add	fress (P.O. Box Number is Not Acceptat	ole)	
			83		HM H	····
			84 City		85 Zip	Code
 Pursuant to the provisions of Sect office or registered agent, or both 	tions 607.0502 and 607.	1508, Florida Statute Such chaorie was ar	s, the above-named cou	poration submits this statement for the patients beard of directors. I bereby accest	FL FL The appointment as	ts registered
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signal (doce providence	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor	uthorized by the corpora rida Statutes. Registered Agent signature requ	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as	registered
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signate 100000 providence Of LE PS	e, in the State of Florida. rept the obligations of, St	Such change was at ection 607.0505, Flor	uthorized by the corpora rida Statutes.	átion's board of directors. I hereby accei	Durpose of changing it pt the appointment as	registered
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signature (deced birts divide 1 0) LE PS FRUSH, LEON	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor otcable. (NOTE DRS	uthorized by the corpora rida Statutos. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE SERS AND DIRECTOR	registered
office or registered agent, or both agent Lam familiar with, and accord GNATURE	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor clicable. (NOTE DRS DELETE	uthorized by the corpora rida Statutes. Registered Agent signature req 13. 1.1 TITLE	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE DERS AND DIRECTOR	registered
office or registeried agent, or both agent I am familiar with, and acco GNATURE ESIGNAL OFFICE OFFICE OFFICE OFFICE IE ME REET ADDRESS Y-ST-ZIP LE	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor otcable. (NOTE DRS	Uthorized by the corpora Registered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE SERS AND DIRECTOR	registered
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE EStructure of account of the provided of a Discrete of the provided of the provided of a Discrete of the provided of the pro	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor clicable. (NOTE DRS DELETE	Uthorized by the corpora rida Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE DERS AND DIRECTOR	registered
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE EStructure (discontinued on a Di ERET ADURESS Y-ST-ZIP LE REET ADURESS Y-ST-ZIP	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was at ection 607.0505, Flor clicable. (NOTE DRS DELETE	Uthorized by the corpora rida Statutes. Registered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE DERS AND DIRECTOR	registered
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE Signal - Idea Provide Arta Ol LE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME REET ADDRESS Y-S1-ZIP LE	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was a echon 607.0505, Flor Alfonde (NOTE DRS DELETE	Uthorized by the corpora Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE CERS AND DIRECTOR Change	registered
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signate 19 accelerations Signate 19 accelerations (O) EE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME EEET ADDRESS Y-S1-ZIP LE ME EEET ADDRESS	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was a echon 607.0505, Flor Alfonde (NOTE DRS DELETE	Uthorized by the corporation Statutes. Eugistered Agent signature regination of the statutes	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE CERS AND DIRECTOR Change	registered
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE Signal - 19 Superior of the a Difference of the agent of the acco Signal - 19 Superior of the acco Office REET ADDRESS (Y-ST-2IP LE ME REET ADDRESS (Y-ST-2IP LE ME REET ADDRESS (Y-ST-2IP	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was a echon 607.0505, Flor Alfonde (NOTE DRS DELETE	Uthorized by the corpora ida Statutos. Rugistered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing it pt the appointment as DATE CERS AND DIRECTOR Change	registered
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE Signale 1 discernations of the PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME REET ADDRESS (Y-S1-ZIP LE ME REET ADDRESS (Y-S1-ZIP LE ME	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor Antrable (NOTE DRS DELETE	Uthorized by the corporation Statutes. Rugistered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	DATE	registered
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signature type a providence of RE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME REET ADDRESS Y-S1-ZIP LE REET ADDRESS Y-S1-ZIP LE REET ADDRESS Y-S1-ZIP	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor Antrable (NOTE DRS DELETE	Uthorized by the corpora Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ation's board of directors. I hereby accein ured when reinstating)	DATE	registered
office or registeried agent, or both agent 1 am familiar with, and acco Signate 1 discrete the providence . Of LE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor Antrable (NOTE DRS DELETE	Uthorized by the corporation Statutes. Rugistered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	DATE	registered IS IN 12 Addition Addition Addition
office or registeried agent, or both agent I am familiar with, and acc GNATURE Signature trace or provide the a OI LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor	Uthorized by the corpora Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing in prithe appointment as DATE CERS AND DIRECTOR Change	registered IS IN 12 Addition Addition Addition
office or registeried agent, or both agent 1 am familiar with, and acc GNATURE Signate 10 bit to provide a con- Cli PS FRUSH, LEON 2877 SO. TRAIL SARASOTA FL LE ME REET ADDRESS (Y - S1 - ZIP LE ME REET ADDRESS	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor	Interviewed by the corporation Statutes. Rugistered Agent signature regination of the second statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing in prithe appointment as DATE CERS AND DIRECTOR Change	registered IS IN 12 Addition Addition Addition
office or registeried agent, or both agent 1 am familiar with, and acc GNATURE ESpecial View provider a OD LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor	Intervised by the corpora Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLÉ 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing in prithe appointment as DATE CERS AND DIRECTOR Change	registered IS IN 12 Addition Addition Addition Addition Addition
office or registered agent, or both agent 1 am familiar with, and acc GNATURE Signate 17 Accel provided and CO LE PS FRUSH, LEON 2877 SO. TRAIL SARASOTA FL NE REET ADDRESS IV-51-7/P LE ME REET ADDRESS IY-51-7/P LE ME REET ADDRESS IY-51-7/P LE ME REET ADDRESS IY-51-7/P LE ME REET ADDRESS IY-51-7/P LE ME REET ADDRESS IY-51-7/P LE ME REET ADDRESS	 In the State of Florida. ept the obligations of, State of the obligations of the obligations of the state of	Such change was an echon 607.0505, Flor	Uthorized by the corpora Rugistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	ation's board of directors. I hereby accein ured when reinstating)	Durpose of changing in per the appointment as DATE CERS AND DIRECTOR Change Change	registered IS IN 12 Addition Addition Addition Addition
office or registeried agent, or both agent 1 am familiar with, and acc GNATURE Second 14 kerne broad here CO LE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL SARASOTA FL LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP	, in the State of Florida. ept the obligations of, St of receivered agent and title 1 ap FFICE RS AND DIRECTC FFICE RS AND DIRECTC	Such change was an echon 607.0505, Flor	Interviewed by the corporation statutes. Rugistered Agent signature regination of the statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	ation's board of directors. I hereby accej ired when renstating) ADDITIONS/CHANGES TO OFFIC	Durpose of changing in per the appointment as DATE CERS AND DIRECTOR Change Change Change	registered IS IN 12 Addition Addition Addition Addition Addition Addition
office or registeried agent, or both agent 1 am familiar with, and acc GNATURE Second 14 kerne broad here CO LE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL SARASOTA FL LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS IY-S1-ZIP	, in the State of Florida. ept the obligations of, St of receivered agent and title 1 ap FFICE RS AND DIRECTC FFICE RS AND DIRECTC	Such change was an echon 607.0505, Flor	Interviewed by the corporation statutes. Rugistered Agent signature regination of the statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	ation's board of directors. I hereby accej ired when renstating) ADDITIONS/CHANGES TO OFFIC	Durpose of changing in per the appointment as DATE CERS AND DIRECTOR Change Change Change	registered IS IN 12 Addition Addition Addition Addition Addition Addition
office or registeried agent, or both agent 1 am familiar with, and acco GNATURE Second 1 december 2010 and EE PS FRUSH, LEON 2677 SO. TRAIL SARASOTA FL LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP	an the State of Florida. ept the obligations of, St of the stated agent and title tap EFICE RS AND DIRECTO FICE RS AND DIRECTO and the state of t	Such change was an echon 607.0505, Flor of cable (NOTE)RS DELETE DELETE DELETE DELETE DELETE DELETE	Uthorized by the corpora Rugistered Agent signature regined 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.4 CITY-ST-ZIP 5.1 TITLE 5.4 CITY-ST-ZIP 5.1 TITLE 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY	ation's board of directors. I hereby accein <u>ADDITIONS/CHANGES TO OFFIC</u> <u>ADDITIONS/CHANGES TO OFFIC <u>ADDITIONS/CHANGES TO OFFIC</u> <u>ADDITIONS/CHANGES TO OFFIC <u>ADDITIONS/CHANGES TO</u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u>	Durpose of changing in per the appointment as DATE CERS AND DIRECTOR Change Change Change	registered IS IN 12 Addition Addition Addition Addition Addition Addition Addition Addition the addition