FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION O	CORPORATIONS		
DOCUI 1. Corporation	MENT # 6029	69 (8)			
	L. WELDY, D.M.D., P.A.				
Principal Place	of Business	Mailing Address			NO
811 - 40TH ST WEST		811 - 40TH ST WEST			
BRADENTON	i FL 34205	BRADENTON FL 3420	15		
8 0 : : 0				3. Date Incorporated or Qual-fied 07/20/1971	3a. Date of Last Report 05/31/1995
	ace of Business	2a. Mailing Address		4. FET Number 59-1356915	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Flection Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(p	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Cui	29 rrent Registered Agent	[30]	Florida Statutes X Yes 10. Name and Address of New I	S
MATERIAL PARTY	5.5 (1)		81 Name		
	, PARK L Th St w		82 Street	Address (P.O. Box Number is Not Acceptal	ole)
	NTON, FL		83		
33505	·		84 City		85 Zip Code
44.6					FL
SIGNATURE _	St.) where, typical or printed name of registered a	gent and tille Fappilizable (19	Tis. Registered Agent signature		DATE
12.	SPD	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12 Change Addition
N4ME	WELDY, PARK L		1.2 NAME		onlings reconst
STREET ADDRESS	811 40TH ST W		1.3 STREET ADDRESS		
CITY+ST-ZIP TITLE	BRADENTON, FL 00000	DELETE	1.4 CHY- \$1-7IP 2-13IL(6		Change Addition
NAME			2.2 NAME		Claride L voortoit
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	···	DELETE	2 4 City - ST - ZiF		
NAME		ב ויינניונ	3 1 THILE 3 2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP		F) DELETE	. 3 4 CITY+SF ZIP		
TITLE NAME		☐ DELET€	4. 1 TITLE 4.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City - St - ZiP		
NAME		☐ DELETE	5 THILE		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CHY+ST+ZIF		
TITLE		DECETE	6 1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STHEET ADDRESS		
City-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do hereb	y certify that the information suppli- the information indicated on this a	ed with this filing is voluntarily furn	hished and does not que	alfy for the exemption stated in Section 119 occurate and that my signature shall have the	.07(3)(k), Florida Statutes, I further
oath; that I	l am an officer or director of th e co	or on an attachment with an order	e empowered to execu	te this report as required by Chapter 607, F	lorida Statutes; and that my name

SIGNATURE:

THE AND TYPED OF PRINTED NAME OF SUPTING OFFICER OF DIRECTOR

3/15/96 941 748 0236