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 # 605170

(0)

NANCY C. BRUEMMER, M.D., P.A.

	FILED	
Jan 21	1998 8:00am	1
Secre	etary of State	

Principal Pla	ce of Busines	e	Mailing	Address									
•		3	_		r T								
2901 ST. ISABEL STREET #A-3 TAMPA FL 33607				2901 ST. ISABEL STREET #A-3 TAMPA FL 33607									
			TAMPA					DO NOT WRITE IN THIS SPACE					
US US									3.	Date Incorporated or Quali	nea		
B. Delnainal I	Diago of Busin		an Mai	ling Addross					-	05/17/1974 FEI Number			oplied For
2. Principal Place of Business				2a. Mailing Address									ot Applicable
Suite, Apt	t. #. etc.			Suite, Apt. #, etc.					59-1526158			\$8.75 Additional	
22	, 5.6		27	¬					5.	Certificate of Status Desire	d 🗆		equired
City & Sta	ate			& State					6.	Election Campaign Financi	ng	\$5.00	May Be
23			28						•	Trust Fund Contribution			to Fees
Zip	·= · · · ·	Country	Zip			ountry	,		8.	This corporation owes or h	as paid the cu	rrent year Inf	tangible
24		25	29		30					Personal Property Tax due] No
	9. Name	and Address of Cur	rent Registered	d Agent					10.	Name and Address of Ne	w Registered	Agent	
BF	RUEMMER, M	IANCY C				81	۱ ۱	Name					
	O1 ST. ISAE					82	1 8	Street Addr	ress (P	O. Box Number is Not Acc	eptable)		
#/	4-3						ļ						
TA	WPA FL 330	307				63							
						84	1	Dity				85 Zip	Code
							l	•			FL	<u>- </u>	
11. Pursuan	t to the provis	ions of Sections 607.0	0502 and 607.15	508, Florida Štat	tutes, the	above	e-n	amed corp	oration	n submits this statement for poard of directors. I hereby	the purpose of	of changing it	ts registered registered
agent. I	am fa miliar w	th, and accept the ob	oligations of, Sec	ction 607.0505,	Florida S	latutes	\$. \$.	ССОГРОГИ	non a b	data of anociolo. Thoroby	лоорг то цр	901111110111 00	70g/0/0/54
SIGNATURE													
	Signature, typed	or printed name of registered		· · · · · · · · · · · · · · · · · · ·			en! s	ignature requir			DATE.	D DIDECTO!	20 (N. 40
12.	1 66	OFFICERS :	AND DIRECTOR	DELETE	1:	3. TITLE				ADDITIONS/CHANGES TO	JEFICERS AN	Change	Addition
TITLE	PD	AED MANOU O		L) bitti								change	/idaidaii
NAME		MER, NANCY C	** 0			NAME		00000					
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	`					I. CITY-S							
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CITY-ST-ZIP						CITY-S							
TITLE	1			DELETE		TITLE				·····		☐ Change	Addition
NAME					5.2	NAME							
STREET ADDRESS	:				5.3	STREET	ADD	DRESS					
CITY-ST-ZIP					l li	CITY-S							
TITLE	 -			DELETE		TITLE						Change	Addition
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STREET ADDRESS	;				6.3	STREET	ADE	DRÉSS					
CITY-ST-ZIP					6.4	I CITY-S	ST - Z	ie					
44 I harabu	certify that th	e information supplied	d with this filing	does not qualify	(for the c	vomn	dial	n stated in	Sectio	n 119.07(3)(i), Florida Statu	tes. I further o	ertify that the	information
officer o	r director of th	ie corporation or the r	eceiver of trusto	e empowered t	iccurate a to execut	and thi e this	at r red	my signatu xort as regi	ire snal uired b	Il have the same legal effectory Chapter 607, Florida Stat	i as ii made u utes; and that	noer oath; the my name ap	au am an pears in
Block 12	or Block 13	changed, or on an a	ittachment with	an address.				. 4		() -			
				2 /BL	1. 3.2				2	nx PA	Ø12	071	1200