## 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 # 637718

(8)

DORSEY OF BOCA GRANDE, INC.

F	ILED	
11	1998	8:00am
cret	ary of	State
	11	FILED 11 1998 cretary of

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Principal Plac	e of Business	Mailing Address	-			I INDUIN AND ININ ERAN INRAL INRAL INNI AFRICATAN DIRICAL RIGHT RIGHT RIGHT AND I
170 W DEAR	BORN ST	170 W DEARBORN ST				
ENGLEWOOD	FL <b>34</b> 223	ENGLEWOOD FL 34223				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						09/27/1979
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				<b>59-1959321</b> Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27				Fee Hequired
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	<b>28</b> ]	Cour	ntrv		
24	25	29	30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
•	9, Name and Address of Curren		1001	_	<del>- , - ,</del>	10. Name and Address of New Registered Agent
DU	INK <b>in,</b> David A.			81	Name	
	0 W DEARBORN ST		-	82	Street A	Address (P.O. Box Number is Not Acceptable)
	223					
			[1	83		
			1	84	City	85 Zip Code
44 0	10, 10, 10, 10, 10, 10, 10, 10, 10, 10,	0 4 007 4/ 00 51-13- 01-1				FL <sup>83</sup> <sup>24</sup> <sup>24</sup>
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga-	of Florida, Such change was a	authorized	bv	the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	in lamilar with, and accept the obliga	anons of, Section 607,0505, Fi	วกผล 5เลเเ	nus.		
SIGNATURE	Signature, typed or prededinarile of registered age	of and title diapplicable (NOT	t Rog stered	Ago	nt signature r	required when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITO			Change Addition
NAME	DORSEY, DENNIS B., M.D.		1.2 NAI			170 Palm Ave, P.O. Box 857
STREET ADORESS	PALM AVE.				ADDRESS	
CITY-ST-ZIP TITLE	BOCA GRANDE FL DST	DELETE	1.4 CIT		- ZIP	339≥( Change  Addition
NAME	DORSEY, HAZEL O.		2.2 NA			· ·
STREET ADDRESS	PALM AVE.				ADDRESS	170 Palm Ave, P.O. Box 857
CITY-ST-ZIP	BOCA GRANDE FL		2.4 CH		1	83921
TITLE		DELETE	3 1 1111			☐ Change ☐ Addition
NAME			3.2 NA	viE.		· —
STREET ADDRESS			3.3 STH	EET /	ADDRESS	
CITY-\$T-ZIP			3.4 CIT	Y-\$1	T-71P	
TITLE		☐ DELETE	4.1 TITE	.E		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STR	EET #	address	
CITY-ST-ZIP	<u></u>	····	4.4 Cf1*		· ZIP	
TITLE		☐ DELETE	5.1 TITE			Change Addition
NAME			5.2 NAM			75
STREET ADDRESS			1		ADDRESS	<u></u>
CITY-ST-ZIP		☐ DELETE	5.4 CIT		- ZIP	D'II
TITLE		רו הבלבו‡	6.1 TITL			Change Addition
HAME OTROET ADORSES			6.2 NAN		1Debess	<b>60000252366</b> 6 -05/14/9801060043
STREET ADDRESS					ADDRESS	***150.80
CITY-ST-ZIP		No. of St. Co.	6.4 C(1)	Y \$1	- ZIP	本本本[記し]。 むし

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 Block 12 or Block 13 if changed, or on an attachment with an address.