## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 638590

(0)

JAMES W. BENNETT, D.C., P.A.

**FILED** Jan 14 1997 8:00am Secretary of State



Principal Place of Business  279 SOUTH YONGE STREET  ORMOND BEACH FL 32174		Mailing Address  279 SOUTH YONGE STREET  ORMOND BEACH FL 32174-6257			3. Date Incorporated or Qualified				
	Place of Business	<b>2a.</b> Mailing Ad	ddress			4. FEI Number		<del>  </del>	plied For
1		[26]				59-1940407			t Applicable
Suite Apt	t. # etc	Suite: Apt	#, etc.			5. Certificate of Status Desired	□ ;		Additional equired
City & Sta	nite	[27]   City & Sta	ite	······································		6 Flortier Commiss Financias		<del></del>	<del></del>
a]		28				6- Election Campaign Financing Trust Fund Contribution	П		May Be to Fees
Z <sub>i</sub> p	Country	Zip		Countr	у	8. This corporation has hability for	intangible tax		
.4	25	29		30			Yes []		100.002
<u></u> L	g. Name and Address of Curr	rent Registered Ager	nt			10. Name and Address of New Re	gistered Age	ent	
RE	NNETT, JAMES W., D.C.			81	Name				
	SOUTH YONGE STREET			82	Stroot Ad	idraes (P.O. Roy Number is Not Accepta	nla\		
ORMOND BEACH FL 32074				62	82 Street Address (P.O. Box Number is Not Acceptable)				
<b>4</b> ) (1				83		· ·			
				84	City			e 7:0	Code
				184	City		FL i	85 Zip	COUR
<b>12.</b>	OFFICERS A	AND DIRECTORS	DELETE.	<b>13.</b>		acired when reinstating) ADDITIONS/CHANGES TO OFFI		RECTO	RS IN 12
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STREET ADDRESS CITY - ST - 70F TITLE			] DELFTE	5.3 STREE 5.4 CHY- 6.1 TH LE 6.2 NAME	1 ADDRESS ST-ZIP	•		Change	Additio

14. I do hereby certily if at 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 trusted 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

964-672-4820