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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 652721

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FILED Apr 29 1997 8:00am Secretary of State

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Principal Plac		Mailing Address			a sasina anat Brita alau idais, tibit 194	er mimit mintt	61411 A1611 4191	A.B.II 1881
118 WEST MA PERRY FL 323		POST OFFICE BOX 11 PERRY FL 32348-0111	1					
				•	3. Date Incorporated or Qualified		ate of Last R	eport
2 Principal P	Prace of Business	2a, Mailing Address			01/18/1980 4, FEI Number	<u> </u>	<u>/02/1996</u>	pplied For
1	race of Eddiness	26			59-1975909		 	t Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
2		City P. State					Fee Re	
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution	П	\$5.00	May Be to Fees
<u>3</u>	Country	Zip	Coun	try	8. This corporation has liability for	intennible		
4	25	29	30	•		Yes [. 100.032,
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered	Agent	
JOI	NES, WAYNE S.		8	Name	Richard L. Windham			
). BOX 111		la la		dress (P.O. Box Number is Not Acceptal	ble)		
PEF	RRY FL 32347				1108 Carissa Dr.			
			8					
			-	34 City	P.O. Box 111, Perry,	FL_32	348	Code
)°	City	m-11-b	FL	69 ZID	code
		6500 007 4500 Florida Ota	tutos tho ohe		19119192366	purpose o	changing	s egistered
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11. Pursuant office or agent 16	to the provisions of Sections 607: registered agent, or both, in the S and familiar with and accept	ilate N Florida, Such change wa bligations of Section 607.0505.	as authorized Florida Statu	ove-named cor by the corpora tes.	rporation submits this statement for the patients board of directors. I hereby acce	pt the app	ointment as	registered
11. Pursuant office or agent in	to the provisions of Sections 607; registered agent, or both, in the S in familiar with and accept as o	Senz and 607, 1908, Florida Statle N Florida. Such change with bligations of Section 607,0505,	as authorized Florida Statu	by the corporates.	Tallahas 200 poration submits this statement for the parties of directors. I hereby acceptions to the parties of the parties o	pt the app	ointment as	registered
11. Pursuant office or i agent 1 SIGNATURE	to the provisions of Sections 607, registered agent, or both, in the Simulative of the section o				poration submits this statement for the patient's board of directors. I hereby acce	pt the app	ointment as	registered
11. Pursuant office or a agent 1 SIGNATURE	Stgrad zw. typed or per too name of registere OFFICERS	d agent and title it applicable. (I AND DIRECTORS			uired when reinstating), ADDITIONS/CHANGES TO OFFI	DATE	DIRECTO	RS IN 12
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Tam 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, a corporation of the corpora

SIGNATURE: