

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

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DOCUMENT # 659754 (6)

1. Corporation Name

DR. RICK E. BRUNS, D.C., P.A.

Principal Place of Business
**1140 S.E. 3RD AVENUE
FT. LAUDERDALE FL 33316**

Mailing Address
**1140 S.E. 3RD AVENUE
FT. LAUDERDALE FL 33316**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/11/1980** 3a. Date of Last Report **01/31/1994**

4. FEI Number **59-1861209** Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Zip 28. Zip Country 29. Zip Country
24. 25. 29. 30.

9. Name and Address of Current Registered Agent

**BRUNS, RICK E., DR
1140 SE 3RD AVENUE
FT LAUDERDALE, FL
33316**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature typed in printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required when remodeling)

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME **PD**
12.2 NAME **BRUNS, RICK E DR**
12.3 STREET ADDRESS **1140 SE 3RD AVE**
12.4 CITY, ST, ZIP **FT LAUDERDALE, FL 00000**
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME ☐ Change ☐ Addition
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST, ZIP
13.5 NAME ☐ Change ☐ Addition
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST, ZIP
13.9 NAME ☐ Change ☐ Addition
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13.97 NAME ☐ Change ☐ Addition
13.98 NAME
13.99 STREET ADDRESS
14.00 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as a duly ordered certificate that I am an officer or director of the Corporation or the sole owner or business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report. I am an officer or director of the Corporation.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/95

(351) 264-8925