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Feb 11 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 671180 (8)

1. Corporation Name

JEANNE D. GIFFORD, M.D., P.A.



Principal Place of Business

1720 COOK AVENUE  
ORLANDO FL 32806

Mailing Address

1720 COOK AVENUE  
ORLANDO FL 32806-2912

3. Date Incorporated or Qualified

05/23/1980

3a. Date of Last Report

02/16/1996

2. Principal Place of Business

2a. Mailing Address

21 22 Lake Beauty Dr

26 22 Lake Beauty

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 102

27 # 102

City & State

City & State

23 Orlando, Fla

28 Orlando, Florida

Zip

Country

Zip

Country

24 32806

25 USA

29 32806

30 USA

9. Name and Address of Current Registered Agent

GIFFORD, JEANNE D.  
1720 COOK AVE.  
ORLANDO FL 32806

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: Jeanne D. Gifford

(Signature typed or printed name of registered agent and date, if applicable)

(NOTE: Registered Agent signature required when reinstating)

1/3/97

DATE

12. OFFICERS AND DIRECTORS

TITLE DS  
NAME GIFFORD, JEANNE D.  
STREET ADDRESS 1720 COOK AVE.  
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE DP  
NAME KOWALSKI, JOSEPH G.  
STREET ADDRESS 1720 COOK AVE.  
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Jeanne D. Gifford

(Signature typed or printed name of signing officer or director)

1/3/97

DATE

407 423 8756

Daytime Phone #

CR2E034 (9/96)