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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 686906 1. Corporation Name

LAKE COUNTY HEARING CLINIC, INC.

		· · · · · · · · · · · · · · · · · · ·						
Principal Place	e of Business	Mailing A	Address					
550 W BURLEIG	GH BOULEVARD		URLEIGH BLVD					
PO BOX 326			PO BOX 326			DO NOT WRITE IN THIS SPACE		
TAVARES FL 32778			TAVARES FL 32778			3. Date Incorporated or Qualifed		
UŞ '	,	US					•	٠,
						09/01/1980 4 FEI Number		Applied For
Principal P	Place of Business	2a. Mailii	ng Address			1 "	<u> </u>	
21		26				59-2027085		Not Applicable
Suite, Apt.	.#, etc.	Suite	e, Apt. #, etc.			5 Certifcate of Status Desired		Additional Required
22	4	27						:
City & Stat	te	City	& State			6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip		Cou	intry	8. This corporation owes the current		
24	25	29		30		Personal Property Tax.	Yes	□No
	9. Name and Address of Curr	ent Registered	Agent			10. Name and Address of New Regi	stered Agent	
		• •			81 Name			
ZEIG	GLER, JOHN T	5			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	W BURLEIGH BLVD	Fisher			0	a same e constant to the constant		
· TAV	'ARES, FL				83	· · · · · · · · · · · · · · · · · · ·	· 结形的 。	
3277	78					<u> </u>	* 5	p Code
			•		84 City		FL 85 Zi	p Code
ري د څ<u>و</u> مېرو ر	607.0	F02 and 607 15	09 Elorida Statut	tos the s	hove-named o	orporation submits this statement for the pur	pose of changing	its registered
						ation's board of directors. I hereby accept the	e appointment as	registered
	10 mm 1 m	madama he ebadi	. ^^7 0505 51-					
agent. I a	am familiar with, and accept the obli	gations of, Secti	ion 607.0505, Fic	orida Stat	utes.			
i'⊷ agent. I a	,			onda Stat	utes.			·
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applica	able (NOTE	onda Stat	utes.	danda wilan tamanana,	DATE DIRECT	TORS IN 12
SIGNATURE	Signature, typed or printed name of registered a OFFICERS		able (NOTE	Registered	utes. I Agent signature rec	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
SIGNATURE	Signature, typed or printed name of registered a OFFICERS	agent and title if applica	able (NOTE	E: Registered 13.	Agent signature rec	danda wilan tamanana,		TORS IN 12
SIGNATURE	Signature, typed or printed name of registered a OFFICERS of DPST ZEIGLER, JOHN T	agent and title if applica	able (NOTE	Registered 13. 1.1 Ti 1.2 N	d Agent signature rec	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12 pe Addition
SIGNATURE 12.	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA	agent and title if applica	able (NOTE	Registered 13. 1.1 Ti 1.2 N	Agent signature rec	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12 le Addition
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered a OFFICERS of DPST ZEIGLER, JOHN T	agent and title if applica	able (NOTE RS	E: Registered 13. 1.1 Ti 1.2 Ni 1.3 S	d Agent signature rec	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	je [] Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA	agent and title if applica	able (NOTE	E: Registered 13. 1.1 Ti 1.2 Ni 1.3 S	I Agent signature rec TLE AME TREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	je [] Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA	agent and title if applica	able (NOTE RS	E: Registered 13. 1.1 Ti 1.2 N 1.3 S 1.4 C	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	je [] Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS A DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able (NOTE RS	E: Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	je [] Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS A DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able (NOTE RS	E: Registerece 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	je [] Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS A DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able (NOTE RS	E: Registerec 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	e Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signature, typed or printed name of registered a OFFICERS A DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE	13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 T	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	e Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE	E: Registerece 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TITLE AME	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	e Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE	E. Registerecce 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	e Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE DELETE	E. Registered 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (3.1 T 3.2 N 3.3 S 3.4 (3.4 C	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC Chang	ge Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE	E: Registerec 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 (3.1 Ti 3.2 N 3.3 S 3.4 (4.1 Ti	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	ge Addition
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 I	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC Chang	ge Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE TITLE	OFFICERS OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 I	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC Chang	ge Addition
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 Ni 1.3 Si 1.4 Ci 2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si 3.4 Ci 4.1 Ti 4.2 Ii 4.3 Si 4.4 Ci 4.4 Si 4.4 Ci 4.4 Si 4.4	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	Chang	ge Addition ge Addition ge Addition
AGENTAL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	able. (NOTE RS DELETE DELETE	E. Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 (3.1 T 3.2 N 3.3 S 3.4 (4.1 T 4.2 I 4.3 S 4.4 C 5.1 T	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC Chang	ge Addition ge Addition ge Addition
AGENTAL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	DELETE DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 (3.1 Ti 3.2 N 3.3 S 3.4 . (4.1 Ti 4.3 S 4.4 C	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE	ADDITIONS/CHANGES TO OFFIC	Chang	ge Addition ge Addition ge Addition Ge Addition
AGENTALIANS SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFICERS OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	DELETE DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 Ni 1.3 Si 1.4 Ci 2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si 3.4 Ci 4.1 Ti 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.2	J Agent signature rec TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE VAME TREET ADDRESS CITY-ST-ZIP TILE	ADDITIONS/CHANGES TO OFFIC	Chang	ge Addition ge Addition ge Addition Ge Addition
AGENTAL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica	DELETE DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 Ni 1.3 Si 1.4 Ci 2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si 3.4 Ci 4.1 Ti 4.2 Ii 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.3 Si 5.3	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	Chang	ge Addition ge Addition ge Addition Ge Addition
AGENTALIANS SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered a OFFICERS DPST ZEIGLER, JOHN T 550 W BURLEIGH BOULEVA TAVARES FL	agent and title if applica AND DIRECTOF	DELETE DELETE DELETE	E: Registerec 13. 1.1 Ti 1.2 Ni 1.3 Si 1.4 Ci 2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si 3.4 Ci 4.1 Ti 4.2 Ii 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.3 Si 5.3	I Agent signature rec ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	Chang	ge Addition ge Addition ge Addition ge Addition

14. 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 charged, of on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90014 023 ***150.00