## 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 # 689381

JAMES H. BALCOM D.D.S., M.S.D., P.A.

## **FILED** Jan 20, 1999 8:00am **Secretary of State**

01-20-1999 90032 012 \*\*\*150.00



Principal Plac	e of Business	Mailing Address					
4850 N. NINTH	AVENUE	4850 N. NINTH AVENUE					
C/O JAMES H. BALCOM			C/O JAMES H. BALCOM				
PENSACOLA FL 32503		PENSACOLA FL 32503	PENSACOLA FL 32503		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		,
					09/25/1980		•
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21		26			59-2056636	No	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.	.,				
	н, сс.	27			5. Certifcate of Status Desired		
City & Stat		City & State			A. Election Committee Cinemators		·
City & Stat	de .				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
23	0	28					) rees
Zip	Country	Zip		muy	8. This corporation owes the current year Intang		
24	25		30	1	1		
	9. Name and Address of Curre	nt Registered Agent		04  11	10. Name and Address of New Registered Ag	jent	
DAL	OOM MARCH			81 Name			
	COM, JAMES H.		09/25/1980 4. FEI Number 59-205663 5. Certifcate of S 6. Election Camp Trust Fund Co 20 Personal Prop 10. Name and Ad 81 Name 82 Street Address (P.O. Box Numb 83 84 City 21tes, the above-named corporation submits this sauthorized by the corporation's board of director lorida Statutes.  (E: Registered Agent signature required when reinstating)	Iress (P.O. Box Number is Not Acceptable)			
	NORTH NINTH AVENUE				Tool (F.S. Box Hallison to Hot Hoodplaste)		. Sk Skin a ke at
PEN	SACOLA FL 32503			83		1 1 1 1 8	图 数据 100
							\$1 / 智 <b>(3</b> 數)
				84 City		85 Zip C	ode
330 S 23 33 33 33		00 - 4 COT 4 COD El-14- Ci-44-	- 44	<u>                                     </u>	tion authority this statement for the purpose of ch	\$5.00 May Be Added to Fees  rear Intangible  res	
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statute e of Florida. Such change was at	es, the a uthorized	bove-named corp t by the corporati	on's board of directors. I hereby accept the appointm	anging its nent as rec	istered
agent l'a	im familiar with, and accept the oblig	ations of, Section 607.0505, Flor	ida Stat	utes.	, ,, ,,	•	
SIGNATURE							
O/O/Mg/1 O/ 12	Signature, typed or printed name of registered ag-	ent and title if applicable. (NOTE:	Registered	Agent signature require			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	☐ DELETE	1.1 TI	TLE		] Change	☐ Addition
NAME	BALCOM, JAMES H.		1.2 N	AME			
STREET ADDRESS	4850 NO. NINTH AVENUE		1.3 ST	REET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL		14 C	TY-ST-7IP			
TITLE		☐ DELETE	_			] Change	Addition
					_	- •	_
NAME.							•
STREET ADDRESS			2.3 S	TREET ADDRESS			
CITY-ST-ZIP		•			•		,
TITLE	5.56 · .		2.4 C	ITY-ST-ZIP			
NAME	1.1.2	☐ DELETE	_			Change	Addition
STREET ADDRESS		☐ DELETE	3.1 TI	TLE	·	Change	☐ Addition
CITY-ST-ZIP		☐ DELETE	3.1 TT 3.2 N	TLE AME	· · · · · · · · · · · · · · · · · · ·	Change	Addition
		☐ DELETE	3.1 TT 3.2 No 3.3 ST	TLE AME TREET ADDRESS	[	Change	Addition
		_	3.1 TT 3.2 No 3.3 ST 3.4. C	TLE AME TREET ADDRESS ITY-ST-ZIP			☐ Addition
TITLE		☐ DELETE	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE		Change	1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (
		_	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT 4. 2 N	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME			1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (
TITLE		_	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT 4. 2 N	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE			1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (
TITLE NAME		_	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT 4. 2 N 4.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME		Change	Addition
NAME STREET ADDRESS		_	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT 4. 2 N 4.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP			1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (
NAME STREET ADDRESS CITY-ST-ZEP		DELETE	3.1 TT 3.2 No 3.3 ST 3.4. C 4.1 TT 4. 2 N 4.3 ST 4.4 CI	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE		Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	, -	DELETE	3.1 TT 3.2 NV 3.3 ST 3.4. C 4.1 TT 4. 2 N 4.3 ST 4.4 CD 5.1 TT 5.2 NV	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	, -	DELETE	3.1 TI 3.2 N/ 3.3 ST 3.4 C 4.1 TI 4.2 N 4.3 ST 4.4 CI 5.1 TI 5.2 N/ 5.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3.1 TI 3.2 N/ 3.3 ST 3.4. C 4.1 TI 4. 2 N 4.3 ST 4.4 CI 5.1 TI 5.2 N/ 5.3 ST 5.4 CI	TILE  AME  TREET ADDRESS  ITY-ST-ZIP  TILE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME  TLE  TLE  TLE  TLE  TLE  TLE  TLE  T		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV 5.3 ST 5.4 CI 6.1 TT	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	A Control of the Cont	DELETE	3.1 TT 3.2 NV 3.3 ST 3.4 CC 4.1 TT 4.2 NV 4.3 ST 4.4 CC 5.1 TT 5.2 NV 5.3 ST 6.1 TT 6.2 NV	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AMIE  TREET ADDRESS  TY-ST-ZIP  TLE  TREET ADDRESS  TY-ST-ZIP  TLE  AMIE  TREET ADDRESS		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	A Control of the Cont	DELETE	3.1 TT 3.2 NV 3.3 ST 3.4 CC 4.1 TT 4. 2 N 4.3 ST 4.4 CC 5.1 TT 5.2 NV 5.3 ST 5.4 CC 6.1 TT 6.2 NV 6.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS		☐ Change	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 changed, or on an attachment with an address, with all other like empowered.