## FILE NOW: FILING FEE AFTER MAY 1 IS \$55,00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMEN

Sandra B. Mortam

Secretary of Standard Secretary of Standard Secretary of Standard Secretary Of Secr

**FILED** 

Apr 04 1997 8:00am

Secretary of State

DOCUMENT # 691207

(5)

Mailing Address

STEVEN M. PRICE, M.D., P.A.

% STEVEN M PRICE 300 E HAZEL ST ORLANDO FL 32904-1023		% STEVEN M PRICE 300 E HAZEL ST ORLANDO FL 32804-4023	300 E HAZEL ST				
						3. Date Incorporated or Qualified 3a. Date of Last Report 07/01/1981 03/11/1996	
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				59-2096835 Not Applicable	
Suite, Apit.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
City & State	p.	City & State				6. Election Campaign Financing \$5.00 May Be	
<b>23</b> Zip	Country	<b>28</b>	<u></u>	intry		Trust Fund Contribution Added to Fees	
24	25	<u> </u>	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
	9. Name and Address of Curr		-			10. Name and Address of New Registered Agent	
PRIC	E, STEVEN M			81	Name	е	
000 5 114 771 07					Street	et Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32804-1023							
				63			
				64	City	<b>85</b> Zip Code	
	and the second of the second o			Ш	· · · · ·	┣┖ │ │ `	
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 Sign of selling to dispersed hank of registered agent and little of applicable (NOTE: Registered Agent signature required when reinstating)  DATE							
12.		ND DIRECTORS	13.	g Age	nt signature	ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11116			_	1.1 TITLE		Change Addition	
NAME	PRICE, STEVEN M		1.2 N	AME			
STREET ADDRESS	300 E HAZEL ST		1.3 S	HEET	address	s	
CITY - S1 - 70P	ORLANDO FL		1.4 C	TY-S	T-ZIP		
Title	\$	DELETE	2.1 TI	TLE		Change Addition	
NAME	Hyer, fred H		2.2 N	AME			
STREET ADDRESS	2501 N ORANGE AVE		2.3 \$	REET	ADDRESS	S	
CITY-S1-ZIP				2 4 C-TY - ST - ZIP			
TILLE	☐ DELEYE 311				Change Addilion		
NAME DEGLET ADDRESS			3.2 N		***********		
STREET ADDRESS  CITY:-S1-ZIP					ADDRESS ST-ZIP		
TILLE		☐ DELETE	411		1 * £IP*	Change Addition	
NAMÉ			4.21			book Criming Supply Middling)	
STREET ADDRESS					address	s	
CITY ST-ZIP			4.4 C	TY-S	T-ZIP		
THLE	☐ DELETE			5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 N	AME			
STREET ADDRESS			5.3 S	THEET	ADDRESS	s	
CITY - ST - ZIP		L Desert	_	TY-S	T-ZIP		
101.E		L) DELETE	6.1 TI			Change Addilion	
NAME			6.2 N				
STREET ADDRESS					ADDRESS	5	
City-St-ZiP 14. I do heret	ov certily that the information suppl	ied with this filing does not qualif		TY-S		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 Black 12 or Black 13 if changed, or on an attachment with an address.							