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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morths

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

## **FILED** May 18 1998 8:00am Secretary of State

CAPITAL HEALTY ASSUCIATES	),IIIO.			
Principal Place of Business	Mailing Address		e sansina tris osida trica ares 1101. nigi	1404 B104 01814 01011 01041 0104 (69)
ROUTE 7 BOX 815-A	PO. BOX 12247	.,		
TALLAASSEE FL 32308 US	Tallahassee FL 3231 US	17	DO NOT WRITE IN	J THIS SPACE
•			3. Date Incorporated or Qualified	
			10/29/1980	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-2039681	Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		· · · · · ·	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid i	the current year Intangible
24 25	29	30	Personal Property Tax due June 30	
9. Name and Address of Cu	rrent Registered Agent	64 61	10. Name and Address of New Regis	itered Agent
MIERS, MILEY		81 Name		
P 0 BOX 12247	Morauna to	82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32317  (Mailing address is	MILL CHAM OK	83		
IALLANASSEE PL 32317	1 - 1			
Marking all mas in	8.0. (DAV 19540	~ 84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607	0502 and 607,1508. Florida Start	ites the above-named co	rporation submits this statement for the purp	
		- 11 1 1 1	ation's board of directors. I bereby accept the	ne appointment as registered
office or registered agent, or both, in the Si	tate of Florida. Such change was	authorized by the corpor.	aborts board of anectors: Thereby accept the	
office or registered agent, or both, in the Si agent, I am familiar with, and accept the of	tate of Florida. Such change was bligations of, Section 607.0505, F	authorized by the corpor forida Statutes.	and its board of amounts. Thoroby accopt the	•
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