

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F12155 (0)

1. Corporation Name
ABBOTT ASSOCIATES OF VERO BEACH, INC.

Principal Place of Business 1848 COMMERCE AVENUE P.O. BOX 6191 VERO BEACH FL 32960 US	Mailing Address P.O. BOX 8063 P.O. BOX 6191 VERO BEACH FL 32963 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 500 W. Wesley Rd, NW	2a. Mailing Address 26 3675 20th ST
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 SUITE E
City & State 23 ATLANTA, GA	City & State 28 VERO BEACH, FL
Zip 24 30305	Country 25
Zip 29 32960	Country 30 Indian River

3. Date Incorporated or Qualified 12/19/1980	
4. FEI Number 59-2045498	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent O'HAIRE, MICHAEL 3111 CARDINAL DR VERO BEACH FL 32960	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3111 CARDINAL DR. 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ABBOTT, PATRICIA MYHAND		1.2 NAME	
STREET ADDRESS 100 OCEAN ROAD., APT 310		1.3 STREET ADDRESS	
CITY-ST-ZIP VERO BEACH FL		1.4 CITY-ST-ZIP	
TITLE PRES. DIRECTOR	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GARRETT, FRANKLIN		2.2 NAME	
STREET ADDRESS 500 W. WESLEY RD., N.W		2.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA, GA 30305		2.4 CITY-ST-ZIP	
TITLE SEC. DIRECTOR	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PATRICIA MARSHALL		3.2 NAME	
STREET ADDRESS 364 85TH ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP SACRAMENTO, CA 95816		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Franklin M. Garrett Jr.* 4/28/98 **6041**
351-8558

CR2E034 (10/97)