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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F33651

(3)

JOHN C. HALL, JR., D.D.S., P.A.

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								DO NOT WRITE IN THIS SPACE			
C/O CHRISTIANSEN & DEHNER, P.A. 2975 BEE RIDGE RD. STE. C SARASOTA FL 34239				C/O Christiansen & Dehner, P.A. 2975 bee Ridge Rd. Ste. C Sarasota Fl. 34239							
								3. Date Incorporated or Qualified			
O Dringing I	N=== = (D: -=	Jana and						<u>05/06/1981</u>			
2. Principal Place of Business			├ ──┐	2a. Mailing Address				4. FEt Number		Applied For	
Suite, Apt.	# 810		26	Suite, Apt. #, etc.				59-2701026		Not Applicable	
22			27					5. Certificate of Status Desired Section 5. Status Desired Fee Required			
City & Stat	е		<u></u> ⊢	City & State				6. Election Campaign Financing	\$5.0	0 May Be	
23		T 65		28				Trust Fund Contribution		d to Fees	
Zip		Country	— <u> </u>	Zip Cou				8. This corporation owes or has paid the current year Intangible			
24	9. Name and Address of Current Regi			tered Agent				Personal Property Tax due June 30. Yes No			
							Name	10. Name and Address of New Registered Agent			
		EN & DEHNER, P.A	l.		81] '	INGILIE				
2975 BEE RIDGE RD						1	Street Addres	ddress (P.O. Box Number is Not Acceptable)			
Suite C Sarasota Fl 34239						╁╌					
) SA	naguia r	-L 34239			63						
			^-		84		City	F	·L '	p Code	
11. Pursuant	to the provi	sions of Sections 607	0502 and 607	7.1508, Florida Statu	tes, the abov	e-n	named corpo	ration submits this statement for the purposion's board of directors. I hereby accept the	e of changing	its registered	
agent. I a	m familiar	yiv, and accept the vi	bigations of	Section 607.0505, Fi	lorida Statute	y լ։ \$.	ne corporatio	on's board or directors. I hereby accept the a	appointment a	as registered	
SIGNATUR€		C.44	<i>ح</i> ر					. ∑. · ·	1-90	}	
Signature, types or printed name of registered agent and title if applicable (NOTE: Register							signature required	(when reinstating) DATI			
12.	No.	OFFICERS	AND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	PST	IOUNIO ID		DELETE	1.1 TITLE				Change	e 🗀 Addition	
NAME .		John C, Jr Outh Dr.			1.2 NAME		İ				
STREET ADDRESS					1.3 STREET						
CITY-ST-ZIP .	SARAS	UIA FL		DELETE	1.4 CITY - S	T-Z	ZIP				
				L. DECEIR	2.1 TITLE				☐ Change	Addition	
NAME CZOCCE ADODESIS					2.2 NAME						
STREET ADDRESS					2.3 STREET						
CITY-ST-ZIP TITLE				DELETE	2.4 City-5 3.1 Title	51-2	ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME				- DELLIE	3.1 TILLE 3.2 NAME			,	E CHANGE	; L. A00(00)	
STREET ADDRESS					3.3 STREET	Afti	neree			}	
CITY-ST-ZIP					3.4. CITY - 9						
TITLE				☐ DELETE	4.1 TITLE	31 - Z	411		Change	Addition	
NAME					4. 2 NAME				Onango		
STREET ADDRESS					4.3 STREET	Anr	ngess				
CITY-ST-ZIP					4.4 CITY-S	-				İ	
TITLE				DELETE	51 TITLE	1-21			ZZ Change	Addition	
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREET	ADI	DRESS	<	1/2	//2	
CITY-ST-ZIP					5.4 CITY-S				11 / //	(4)	
TITLE				DELETE	6.1 TITLE	, 21	" 		Change	Addition	
NAME					6.2 NAME			4000024303 -02/13/98010321	374 "		
STREET ADDRESS					6.3 STREET	ADD	DRESS	-02/13/98010324	J15	1	
CITY-ST-ZIP					6.4 CITY-S		- 1	***150.00			

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 other attachment with an address.