COR ANNU	PROFIT PORATION IAL REPORT 1997			RIDA DEPAR Sandra B. Secretary VISION OF C	Morthan	m	Feb 18 1997 8:00an Secretary of State				
	MENT # F Name MARY'S CLINIC,	75027 INC.	((5)			A DOG HIER AND A REAL AND A			RI f il fil il	
rincipal Place MALLORY E. IT. 1.BOX 942 ALLAHASSEE	. Horne	Mailing Address % NALLORY E. HORNE RT. 1.BOX 942 TALLAHASSEE FL 32312-9901			3. Date Incorporated or Qualified 3a. Date of Last Report						
						. <u></u> ,	04/05/1982	<u> </u>	04/23/		
 Principal Pla 	ace of Business		2a. Mailing A	ddress			4. FEI Number 59-2891232				plied For t Applicable
Suite, Apt. #	#. etc		Suite, Ap	t. #, etc.			5. Certificate of Statu	s Desired	\$	8.75 /	Additional
			27 City & Sta	ato					<u> </u>	Fee Re	·
City & State	2		28	die			6. Election Campaign Trust Fund Contrib	-		\$5.00 Added t	
Zip	Coun	irý	Zip		Count	ry	8. This corporation ha			under s.	
	25 9. Name and Addi	oop of Current	29 Registered Age		30		Elorida Statutes 10. Name and Addres		Yes N		
	1,BOX 942 LAHASSEE FL 3231	2			8		dress (P.O. Box Number is	Not Acceptab	ole)		
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