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

Mailing Address

P.O. BOX 380546 BIRMINGHAM AL 35238-0546

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2 PERIMETER PARK S.

SUITE 224 W. BIRMINGHAM AL 35243



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

FILED

May 16 1997 8:00am

Secretary of State

(205) 967-7116

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300005256 (3)

APPLE OCCUPATIONAL HEALTH SERVICES, INC.

	-				3. Date incorporated or Qualified 3a. Date of Last Rep		
2. Principal Place of Business 28. Mailing Address					11/18/1993 04/09/1996 4. FEI Number Applia 5		
	REALTHSOUTH PARKWAY	26. Maning Address			4. FEI Number Applie 59-3132404 Not Applie		
Suite, Apt.		Suite, Apt. #, etc.			SR 75 Addition		
22		27			6. Certificate of Status Desired Fee Required		
City & Stan	С	City & State			6. Election Campaign Financing \$5.00 May Be		
23 BIRMI	NGHAM, AL	28			Trust Fund Contribution Added to Fees		
Ζip	Country	Zip	Cour	lry	8. This corporation has liability for intangible tax under s. 199.03		
24 35243	25	29	30		Florida Statutes XX Yes No		
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent		
CT (CORPORATION SYSTEM		1	31 Na	Name		
120	0 S. PINE ISLAND RD.		R.		82 Street Address (P.O. Box Number is Not Acceptable)		
PLA	NTATION FL 33324			- 0."	most radios (i.e. box rainos is not resopusos)		
		1		33			
				B4 Cit	City FL 85 Zip Code		
rangag magaaan ah si niji				Щ,			
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	J2 and 607.1508, Florida Statu e of Florida. Such change was	ites, the a b authorized	ove-nar by the	amed corporation submits this statement for the purpose of changing its regist the corporation's board of directors. I hereby accept the appointment as register		
agent La	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statu	tes.			
SIGNATURE	Sliphatine Typied or printed name of registered ag-	ner word that if more in table (NiO	16 Pogistared	Anont eig	signature required when reinstating) DATE		
12.		ID DIRECTORS	13.	vite it sift.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
THUE	PCD	△ DELETE	1.1 111	F	VPTD XX Change XX Ac		
NAME	BELYEA, CELESTE		1.2 NA		BEAM, AARON, JR.		
STIFELT ADORESS	286 N. US 1			EET ADDR			
City-\$1-2iP	ORMOND BEACH FL 32174			Y-ST-ZIP			
TULE	DVT	X DELETE	2.1 TIT		VPSD XXX Change		
NAME	GERKIN, ALICE M		2.2 NA		TANNER, ANTHONY J.		
STREET ADORESS	286 N. US 1			··· Eet addr			
CITY - ST - ZIF	ORMOND BEACH FL 32174			Y - ST - ZIF			
HUE	VC	X DELETE	3.1 717		COBD XXX Change XXX Ac		
NAME	SCRUSHY, RICHARD M	997 17	3.2 NA		SCRUSHY, RICHARD M.		
STREET ADORESS	2 PERIMETER PARK S., #224	W		EET ADDR			
STREET ALL MESS	BIRMINGHAM AL 35243	**		Y-ST-ZIF			
TITLE	D	X) DELETE	4.1 Til		VP XIX Change XIX Ac		
NAMÉ	TAYLOR, LARRY R	TIP	4. 2 NA		BOTTS, RICHARD E.		
STREET ADDRESS	2 PERIMETER PARK S., #224	W		ieet addr			
CITY ST ZIE	BIRMINGHAM AL 35243	**		Y-ST-ZIP	WTW175107111		
HILF	S	DELETE	5.1 TIT		VPAS XXI Change XXXI Ac		
NAME	DEMARAY, C D		5.2 NA		DEMARAY, C. DREW		
			₩.E. 981		ONE THEAT MUSICALITY DAMPERATE		
2238011 A008555	2 PERIMETER PARK S #224	W	5380	IFFT ANDA	DRISS ONE REALINSOUTH PARKWAY		
STREET ADDRESS	2 PERIMETER PARK S., #224 BIRMINGHAM AL 35243	W		EET ADDA	DIDUTTIONAL AT OFOLO		
OHY-\$1-7-2	2 PERIMETER PARK S., #224 BIRMINGHAM AL 35243		5.4 C()	Y-ST-ZIP	BIRMINGHAM, AL 35243		
OHY-ST-755		W DELETE	5 4 C/T 6.1 T/T	Y-ST-ZIP .E	DIDUTUONAN AT OFOLO		
OHY-\$1-7-2			5 4 C/T 6.1 T/T 6.2 NA	Y-ST-ZIP .E	BIRMINGHAM, AL 35243		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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