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PROFIT CORPORATION ANNUAL REPORT

1997

DOCUMENT # G07195

W. CANNON SIMPSON, JR., M.D., P.A.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

FILED Mar 24 1997 8:00am Secretary of State

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% W. CANNON SIMPSON, JR., M.D. 1820 BARRS STREET, SUITE 724 JACKSONVILLE FL 32204	1820 BARRS	% W. CANNON SIMPSON, JR., M.D. 1820 BARRS STREET, SUITE 724 JACKSONVILLE FL 32204-4782						
PROMOGRATILE TE SELVI			****		3. Date Incorporated or Qualified	3a. Date	of Last R	eport
					10/28/1982	04/16	/1996	
2. Principal Place & GCBa ariess	2a. Mailing) Address			4. FEI Number	,,	AF	oplied For
21	26		<i></i>		59-2230838			ot Applicable
Sate Ant # on 22	Suite, 7	Apt. #, etc.			5. Certificate of Status Desired			Additional equired
Oity & Strate	City & 28	State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees
	entry Zip				8. This corporation has liability for i	intangible ta		
24 25	29		30		· · · · · · · · · · · · · · · · · · ·	Yes 🗌		
	ddress of Current Registered A	gent			10. Name and Address of New Re	gistered Ag	ent	
SIMPSON, W. CANNO	ON. JR., M.D.		81	Name				
1820 BARRS STREET	, SUITE 724		82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
JACKSONVILLE FL 32	204		83					
			84	City		F.	85 Zip	Code
					rporation submits this statement for the p	FL		
12.	OFFICERS AND DIRECTORS		13.	nt signature requ	uired when reinstairing) ADDITTIONS/CHANGES TO OFFIC			
TOP		L.J DELETE	1.5 THILE	ļ		L	J Change	Addition
SIMPSON, W.C.	· · · · · · · · · · · · · · · · · · ·		1.2 NAME	İ				
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information in the and on the annual report or supplemental and all reports true and accurate and that my signature shall have the same legal effect as if made under oath; that tarm an officer and rector of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 565 k. 12 or Block 13 Echanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

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