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

**PROFIT** CORPORATION ANNUAL REPORT

1998

4

于日本了多少,山林是我了人生活为,这是我们还在我们们的时候,她就是是是我们的最后的,是是真实是这种的人。

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 14 1998 8:00am Secretary of State

VALERIE CRANDALL, M.D., P.A.								
Principal Place of Business Mailing Address			s					
3900 BROADWAY SUITE 14 FT. MYERS FL 33907 US		3900 BROADWAY, SUITE 14 FORT MYERS FL 33901				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
••						01/01/1983		
2. Principal Place of Business		2 <sub>B</sub> , Mailing Add	2s. Mailing Address			4, FEI Number Applied For S9-2245326 Not Applicable		
Suite, Apt. W. etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State	<b>⊢</b>			B. Election Campaign Financing     Trust Fund Contribution     Added to Fees		
Zip 24	Country 26	7ip	p Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No		
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
JACKSON, JERRY L.				81	Name			
2160 TREEHAVEN CIRCLE FT. MYERS FL 33907					Street	Address (P.O. Box Number is Not Acceptable)		
				83				
				84		FL 85 Zip Code		
office or i	to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob-	ate of Florida. Such char	nge was author	rized by	the cord	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12. OFFICERS AND DIRECTORS 13.					ili signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	D		.1 TITLE		CRANDAL) Valerie Change Addition		

MOORE, VALERIE CRANDALL 1.2 NAME 3900 Broad way 3960 BROADWAY, SUITE 14 1.3 STREET ADDRESS STREET ADDRESS FT. MYERS FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE TITLE 2.1 TITLE JACKSON, JERRY NAME 2.2 NAME 2160 TREEHAVEN CIRCLE STREET ADDRESS 2.3 STREET ADDRESS FT. MYERS FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-Z#P 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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(3X)), 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: