

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

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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 JUL 15 PM 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H35642 (8)**
1. Corporation Name
JAMES D. HEMMIG, O.D., P.A.



Principal Place of Business: **4400 HWY 20 EAST, SUITE #112 NICEVILLE FL 32578**
Mailing Address: **PO BOX 5039 NICEVILLE FL 32578-5039 US**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		12/27/1984	04/22/1996
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		4. FLI Number	Applied For / Not Applicable
23. City & State		28. City & State		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	25. Country	29. Zip	30. Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
HEMMIG, JAMES D., O.D. 4400 HWY 20 EAST NICEVILLE FL 32578				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	
				85. Zip Code	
				86. State	
				87. Country	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEMMIG, JAMES D., O.D.	1.2 NAME	
STREET ADDRESS	4400 HWY 20 EAST	1.3 STREET ADDRESS	500002242925--7
CITY-ST-ZIP	NICEVILLE FL	1.4 CITY-ST-ZIP	-07/21/97--01095--004
	<input type="checkbox"/> DELETE	1.5 CITY-ST-ZIP	****165.00 ****165.00
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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. 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: *James Hemmig* 7/18/97 904-897-2020

CR2E034 (9/96)

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July 8, 1997

James D. Hemmig, O.D., P.A.
4400 Hwy. 20 East, Suite #112
Niceville, FL 32578

Annual Reports Filings
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314
ATTN.: Leslie S. Ellers

Re: James D. Hemmig, O.D., P.A.
Document #: H35642

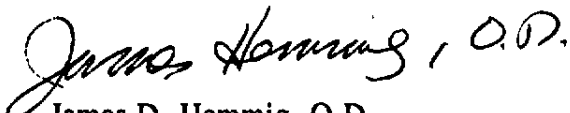
Dear Sirs,

Enclosed is the 1997 Profit Corporate Annual report, along with a check for \$165.00.

I am requesting that you abate the late filing penalty of \$385.00. I was unable to send my payment timely, since I did not receive the enclosed 1997 Profit Corporation Annual Report Form before the filing dead line of May 1, 1997.

Thank you in advance for your assistance in this matter. Please feel free to contact me if you have any questions.

Sincerely,


James D. Hemmig, O.D.

Enclosures