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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H76543

(8)

DEBORAH JEAN BLANTON, M.D., P.A.

							A
Principal Place of Business Mailing Address					F TOOLD'S AND SEALU AND SEALURANTED BUILD BY BUILD BUILD STATE STATE STATE STATE STATE STATE STATE STATE STATE		
486 HENKEL DRIVE 466 HENKEL CIRCLE WINTER PARK FL 32789 WINTER PARK FL 32789-5144 US US			5144				
					3. Date Incorporated or Qualified 3s. Date of Last Report 09/11/1985 06/24/1996		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied F	or
21		26			59-2579844	Not Appli	icable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Addition Fee Required	
City & Stat	te	City & State		+	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May B Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i		
24	25	29	30	•	· · · · · · · · · · · · · · · · · · ·	Yes No	U.,
1	9. Name and Address of Curren		1551		10. Name and Address of New Re		
RI A	NTON, DEBORAH JEAN			81 Name	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
466 HENKEL CIRCLE				82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
WINTER PARK FL 32789				83			
***				84 City	orporation submits this statement for the p	FL 85 Zip Code	
office or lagent. La	registered agent, or both, in the State yn fanullar with, and accept by oblige Signature, typed or profes name of registered age	of Florida: Such change was atio nofol, Section 607,0505, F	authorized lorida Stat O O O TE: Registered	t by the corporates.	ration's board of directors. Thereby acception in the company of t	the appointment as registe 5-97 DATE	ered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
Title	DP	☐ DELETE	1 1 TI	LE		Change A	Addition
NAME	MILTENBERGER, DEBORAH B.		1 2 N/	ME			
STREET ADDRESS	466 HENKEL CIRCLE		1.3 ST	HEET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL		_	Y-ST-ZIP			
TITLE		DELETE	2 1 TI	LE		L Change L A	Addition
NAME			2 2 NA	ME			
STREET ADDRESS			2 3 ST	REET ADDRESS			
CITY-SI-7:P		- Br. cer		TY-ST-ZIP			
TITLE		☐ DEFELE	3 1 711	1		∐ Change	Addition
NAME		•	3.2 N/	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
City-St-7iP		Decem	_	TY-ST-ZIP			Ladist
TITLE		☐ DELETE	4 1 TII			L_ Change L_ A	Addition
NAME			4 2 N				
STREET ADDRESS				REET ADDRESS			
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TITLE		DELETE	5.1 TI			☐ Change ☐ A	Addition
NAM č			5.2 N/				
STREET ADDRESS			. It	REET ADDRESS			
CITY - ST - ZiP				Y-ST-ZIP		<u> </u>	Cite
TITLE		☐ DELETE	6.1 17	LE		Change A	Addition
NAME			6.2 N/	ME			
STREET ADDRESS			6.3 ST	REET ADDRESS			

64 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