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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

WILLIAM & GREENRERG M.D.

**FILED** Apr 28 1998 8:00am Secretary of State

TAIPEIV	W N. GREENDENG, W.D.,	r ·n·				
Principal Place	e of Business	Mailing Address				OL DIBIL BLAIL BLAIL BLAIL BLAIL IGH
10801 STARKEY RD		10801 STARKEY RD				
ST 303		\$T 303				
LARGO FL 33777		LARGO FL 33777				IN THIS SPACE
US		U\$ 			3. Date Incorporated or Qualified 12/11/1985	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2599301	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Žip	Country	Zip	Coun	try	8. This corporation owes or has pa	~ ~
24	25	29	30		Personal Property Tax due June	
	9. Name and Address of Curre	ent Registered Agent	_ <del></del> ,	Mana	10. Name and Address of New Re	gistered Agent
	UFFMAN, JAY E.		1,	Name V	JILLIAM R. GREE	NBERG
5999 CENTRAL AVE			Ī	32 Street Add	Iress (P.O. Box Number is Not Acceptal	ole)
SUITE 203			ļ.,	1080	1 STARKEY RD	57 303
j ST.	PETERSBURG FL 33710			33	.6	
			[	34 City	ARGO	FL 85 Zip Code 33777
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						
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	(1)000 A (mean)	Dun				9-31-98
	Signature, typind or printed name of registered a	agent and Me it applicable	(NOTE: Registered	Agent signature requ	ired when reinstating)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	P	∐ DI	ELETE 1.1 TITL	E	, , , , , , , , , , , , , , , , , , , ,	Change Addition
NAME	GREENBERG, WILLIAM R.		1.2 NAN		Steenberg William P	3
STREET ADDRESS	5425 PARK ST N ST 4W		1.3 STR	EFT ADDRESS	10801 STARKEY RD	2 1 303
CITY-ST-ZIP	ST. PETERSBURG FL 33709			-ST-ZIP	LARGO PC 387	7.7
TITLE		[] Di	ELETE 2.1 TITL	F		Change Addition
NAME			2.2 NAN	Œ j		
STREET ADDRESS			2.3 STR	EFT ADDRESS		
CITY-ST-ZIP	<u></u>			Y-ST-ZIP		
TITLE		□ DI	ELETE 3.1 TITL	E	3	Change Addition
NAME			3.2 NAN	NE		
STREET ADDRESS			3.3 STR	EET ADDRESS		:
CITY-ST-ZIP				Y - ST - ZIP		
TITLE		[] Di	ELETE 4.1 Titl	£		Change Addition
NAME			4. 2 NA	v1E		
STREET ADDRESS			4 3 STR	EET ADDRESS		
CITY-ST-ZIP				'-ST-ZIP		
TITLE		□ DI	ELETE 5.1 TITL	E		Change Addition
NAME			5.2 NAM	IE		
STREET ADDRESS			5.3 STR	EE1 ADDRESS		
CITY-ST-ZIP				r-ST-ZIP		
TITLE			ELETE 6.1 TITU	F -		Change Addition
NAME			6.2 NAN	1E		
STREET ADDRESS			6.3 STR	EET ADDRESS		•

SIGNATURE:

14. Thereby 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 coeriver or trustec empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

813-393-5766