

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

FILED
Mar 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **H93065**

(1)

1. Corporation Name

DIANA B. DENHOLM, PH.D., P.A.

Principal Place of Business

**2151 45TH STREET #304
WEST PALM BEACH FL 33407**

Mailing Address

**2151 45TH STREET #304
WEST PALM BEACH FL 33407**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/07/1986

4. FEI Number

59-2665517

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1617 N. Flagler Dr.

Suite, Apt. #, etc.

22 10A

City & State

23 West Palm Beach, FL

Zip

24 33407

Country

25 USA

2a. Mailing Address

26 1617 N. Flagler Dr.

Suite, Apt. #, etc.

27 10A

City & State

28 West Palm Beach, FL

Zip

29 33407

Country

30 USA

9. Name and Address of Current Registered Agent

**DENHOLM, DIANA
2151 45TH ST.
SUITE 304
W. PALM BCH FL 33407**

10. Name and Address of New Registered Agent

81 Name

DENHOLM, DIANA

82 Street Address (P.O. Box Number is Not Acceptable)

1617 N. Flagler Dr.

83

10A

84

City West Palm Beach

FL

85 Zip Code

33407

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

Diana B. Denholm, P.A.

Diana B. Denholm

3/14/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME PST
DENHOLM, DIANA B.
STREET ADDRESS 2151 45TH STREET #304
CITY-ST-ZIP WEST PALM BEACH FL**

TITLE ☐ DELETE

**NAME D
DENHOLM, DIANA B.
STREET ADDRESS 2151 45TH STREET #304
CITY-ST-ZIP WEST PALM BEACH FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

**1617 N. Flagler Dr., #10A
West Palm Beach, FL 33407**

1.4 CITY-ST-ZIP

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

**1617 N. Flagler Dr., #10A
West Palm Beach, FL 33407**

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

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(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: *Diana B. Denholm* **Diana B. Denholm**

3/14/98

CP2E034 (1097)