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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J72261

(7)

HOWARD G. GROSHELL, D.P.M.,P.A.

FILED
Apr 24 1997 8:00am
Secretary of State

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Principal Place	of Business	Mailing Address	T SEGULUS BAIN ARBIN HERE HARR BURKI BARN BURKI				
% HOWARD G. (2236 PARK ST. JACKSONVILLE		% HOWARD G. GROSHELL 2236 PARK ST. JACKSONVILLE FL 32204-4					
					3. Date Incorporated or Qualified	3a. Date of Last F	eport
D to all a l Di					05/12/1987	08/06/1996	
	ace of Business	2a. Mailing Address			4. FEI Number	}	oplied For
Suite, Apt. #	t elc	26 Suite, Apt. #, etc.			59-2809274	¢0.75	ot Applicable Additional
22	, 010.	27			5. Certificate of Status Desired	Fee Ro	
City & State		City & State			6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for i		. 199.032,
24	9. Name and Address of Currer	29 Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
ODO		it negistered Agent		B1 Name	10. Name and Address of New Ac-	gistered Agent	
GROSHELL, HOWARD G. JR 2236 PARK STREET							
	SONVILLE FL 32204			82 Street Add	ress (P.O. Box Number is Not Acceptab	·le)	
				83			
				84 City		85 Zip	Code
14 Durement to	a the provisions of Sections 607.050	12 and 607 1609 Etyrida Statut	or the ob	ove named cor	poration submits this statement for the p	FL 65 Zip	c registered
office or re	oistered agent, or both, in the State	of Florida. Such change was a	authorized	by the corpora	ation's board of directors. I hereby accep	of the appointment as	registered
	if tagy far with, and accept the oblig		nida Stait	JIOS.		4 .0 07	
SIGNATURE	Signature, Typod or practice name of registered age	ont and little if applicable (NOTI	Higistered	Agent signature requ	Fred wher, reinstaling)	4-18-97	
12.	OT TOP TO	e pint of one	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	P CONTRACT LIGHT CONTRACT	DELFTE	1.1 101			Change	Addition
NAME	GROSHELL, HOWARD G. JR.		1.2 NAI				
STREET ADDRESS	2236 PARK ST. JACKSONVILLE FL		4	REET ADDRESS			
CITY-ST-ZIP TITLE	JACKSUNVILLE FL	DELETE	21181	Y-S1-71P		Change	Addition
NAME		LJ WHAT	2.2 NAI			Gridinge	Audition
STREET ADDRESS			1	NEET ADDRESS			
CITY-ST-ZIP				IY-SI-ZIP			
TITLE		DELETE	3.1 1111			Change	Addition
NAME			3.2 NAI	1		. – -	_
STREET ADDRESS			3.3 S1F	EFT ADDRESS			
CITY-ST-ZIP			3.4.00	Y-ST-7IP			
TITLE		DELETE	4.1 1/1	.E		Change	Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STF	REET ADDRESS			
CITY-ST-ZIP				Y · \$1 - 7IP			
TITLE		DELETE	5.1 7177			Change	Addition
NAME			5.2 NAI	[·		
STREET ADDRESS				IFET ADDRESS			
CITY-ST-ZIP		DELETE		Y-ST-ZIP		Oharra	Addition
TITLE		L DETEIL	6.1 111	Y		Change	Addilion
NAME DIRECT ADDOCCO			6.2 NA				
STREET ADDRESS	, with			REET ADDRESS			
CITY-ST-ZIP	· .		6.4 CH	Y - \$1 - ZIP			·

14. I do hereby certify that the information supplied with this filling 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 fruc 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.