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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K43610

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HARTMAN, LARIMORE & SHUPE, M.D., P.A.

FILED Feb 25 1997 8:00am Secretary of State



L HHODER CHAR	on of Business	Mailing Address				#8# 8 8 8 8 # 8	DEBEK WIWEL IBWI
Principal Place of Business * JOHN R. HARTMAN M.D.		Mailing Address % JOHN R. HARTMAN M.D.					
825 E OAK ST Kissimmee fl		825 E OAK ST KISSIMMEE FL 34744-583	825 E OAK ST Kissimmee Fl 34744-5838				
US		US			3. Date Incorporated or Qualified 11/15/1988 3a. Date of Last Report 05/01/1996		•
2. Principal f	Place of Business	2a. Mailing Address		···-	4. FEI Number		Applied For
1		26			59-2909828		Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional e Required
City & Sta	ate	City & State			6. Election Campaign Financing	\$5	.00 May Be
3		28			Trust Fund Contribution	☐ Ad	ded to Fees
⊒Zip ≔j	Country	Zip	Countr	У	8. This corporation has liability for it		der s. 199.032,
4	25 9. Name and Address of Currer	29 nt Segistered Agent	[30]		Florida Statutes 10. Name and Address of New Reg	Yes No	
IALI	RTMAN, JOHN R.	it tregistores rigorit	81	Name	10	justico Politico	
	5 E OAK ST		<u> </u>	1			
	SSIMMEE FL 34744		82	Street Add	dress (P.O. Box Number is Not Acceptab	.⊕)	
100	TOWNSELL COLLABORATION OF THE PARTY OF THE P		83	d			
				1 0:		[2_1	7:- 0
			84	1 ′		FL T	Zip Code
11. Pursuani	nt to the provisions of Sections 607.050	02 and 607 1508, Florida Stat	utes, the above	ve-named cor	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of chang	ing its registered
office or abent 1	rregistured agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was lations of Section 607 0505. I	s authorized b Florida Statute	by the corpora	ation's board of directors. I hereby accep	t the appointmen	nt as registered
		among of gooden out tooget,	. To The Dialon				
SIGNATURE	Stgruitine, typed or printed dame of registered age	ent and title if applicable. (N	OTE Registered A	gent signature requ	uired when reinstating)	DATE	
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∠ .		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
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information indicated on this annual report or supplemental annual report is true a Lam an officer or director of the corporation or the receiver or trustee empowered appears in Block 12 or Block 13 if changed, or on an attachment with an addirect