

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 2:12

DOCUMENT # K91482 (5)

1. Corporation Name
LCO GROUP, P.A.

Principal Place of Business
600 NORTH BLVD. WEST SUITE C
LEESBURG FL 34740

Mailing Address
600 NORTH BLVD. WEST SUITE C
LEESBURG FL 34740

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/24/1989 3a. Date of Last Report 05/01/1994

4. FEI Number 59-2953521 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FULLER, BARBARA
600 NORTH BLVD. WEST
SUITE C
LEESBURG FL FL 34740

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0503, Florida Statutes.

SIGNATURE

Barbara Fuller

1/27/95

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

(NOTE: Registered Agent signature required when registering)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

PD
HUNTT, H. ANDREW JR.
600 N BLVD. WEST
LEESBURG FL 34740

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

STD
COWIN, JOHN A M.D.
600 N BLVD. WEST
LEESBURG FL 34740

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

VD
OLLIVIERRE, CARL O M.D.
600 N BLVD. WEST
LEESBURG FL 34740

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

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8.4 CITY - ST - ZIP

8.1 TITLE
8.2 NAME
8.3 STREET ADDRESS
8.4 CITY - ST - ZIP

SIGNATURE:

H. Andrew Hunt Jr.

(SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Signature Page #