SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** DRPORATION ÄNNUAL REPORT

Principal Place of Business

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L03600

(8)

Mailing Address

MANAGEMENT PRESCRIPTIVES, INC.

97 OCT 10 MIIO: 20



POWERS, PYLES, SUTTER & VERVILLE, P.C. 1275 PENNSYLVANIA AVE NW THIRD FLOOR WASHINGTON DC 20004-2404 US	POWERS. PYLES. SUTTER & VERVILLE. P.C. 1275 PENNSYLVANIA AVE NW THIRD FLOOR WASHINGTON DC 20004-2404 US		DO NOT WRITE IN THIS SPACE			
	POWERS, PVI.ES.	SUTTER	3. Date Incorporated or Qualified 07/20/1989	3a. Date of Last Report 03/29/1996		
Principal Place of Business  MANAGEMENT PRESCRIPTIVES, 28. Mailing Add VERVILLE			4. FEI Number 65-0136711	Applied For Not Applicable		
Sulle Apt. # ecckenridge PKWY	PKWY Suite Apt. #. etc. 12		Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State TAMPA, FLORIDA	City & State 28 NW, WASHINGTON, DC		B. Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 33610 25 USA	Zip Cour 29 20006-5409 30 USA	•	This corporation owes or has paid     Personal Property Tax due June 3			
9. Name and Address of Current	10. Name and Address of New Registered Agent					
50114 RRECKENRINGE PKWY		81 Name	ne			
		B2 Street Addres	at Address (P.O. Box Number is Not Acceptable)			
		33				
11. Pursuant to the provisions of Sections 607 0502	84 City		FL 85 Zip Code			

office or r	to the provisions of Sections 607.0502 and 607.15 egistered agent, or both, in the State of Florida Sum familiar with, and accept the obligations of, Sec	ich change was au	uthorized by the cor	d corporation submits this statement for the purpose operation's board of directors. I hereby accept the ap	of changing it pointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered agent and title it applies	•		e required when reinslating) DA16		
12.	OFFICERS AND DIRECTORS		13.	e required when reinslating) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CPD DELETE		1.1 TUTUE	ASSITIONO/OFF/MAZS TO OFFICE AN	Change	Addition
NAME	SPENCER, DAVID S.	<del></del> · -	1.2 NAME			
STREET ADDRESS	5911-A BRECKENRIDGE PARKWAY		13 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33610		1.4 CITY-ST-ZIP			
TOTLE	TD	DELETE	21 1/11		Change	Addition
NAME	ANASTASIO, LANCE W.		2.2 NAME		orange	L Addition
STREET ADDRESS	200 AVE. F, NE		2 3 STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN FL		2.4 CITY-ST-ZIP	·		
TITLE	DVP	DELETE	3.1 TITLE		Change	Addition
NAME	CHAISTAIN, GEORGE M. MD	<del></del>	3.2 NAME			
STREET ADDRESS	417 THIRD AVE.		3.3 STREET ADDRESS			
CITY-ST-ZIP	ALBANY GA		3.4. CITY-ST-ZIP			
TITLE	SO	DELETE	4.1 TITLE	SD	Change	Addition
NAME	POWERS, GALEN D.		4.2 NAME	POWERS, GALEN D.		
STREET ADDRESS	1275 PENNSYLVANIA, AVE 3RD FLOOR		4.3 STREET ADDRESS	1875 I STREET, 12th FLOOR		
CITY-ST-ZIP	WASHINGTON DC		4.4 C(TY-ST-ZIP	N.W. WASHINGTON, DC 20006-	5400	_
TITLE		DELFTE	51 11111	D 20000=	Changa:	bc to Adoltion
NAME			5.2 NAME	JOHNSON, RONALD L.	_ ( <b>V</b> )	' (k
STREET ADDRESS			5.3 STREET ADDRESS	3146 BLACKHAWK MEADOW DRIVE		$\alpha$
CITY-ST-ZIP			5.4 CITY-SI - ZIP	DANVILLE, CA 94506	$\omega_{\lambda}$	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
TITLE	Ł	DELETE	6.1 TITLE	D	☐ Change	<b>X</b> ∧ Addition
NAME			6.2 NAME	WILLIAMSON, KEN E.		
STREET ADDRESS			6.3 STREET ADDRESS	809 HIGHWAY 1, WEST	r. \$	<u> </u>

14. I do hereby certify that the hitorrelation supplies 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 is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the cyboration or the receiver or fursite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 19 Webster on an attachment with an address.

202-466-650

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