FILE !	NOW:	FILING	FEE	<b>AFTER</b>	MAY	1	IS	\$225.0	00
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**PROFIT** CORPORATION ANNUAL REPORT



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

1996

<ol> <li>Corporation</li> </ol>	MENT # <b>L0663(</b>	6 (9)			
OCOE	E FAMILY MEDICAL CENTE	R, INC.		A ISBANGU BU GANG BANG BANG BANG	NAMA BINI BIBNI BIBNI BIBNI BIRNI BIBNI BIBNI BIBNI BIBNI
Principal Place	of Business	Mailing Address			
-		•	·*		
% MICHAEL LALIBERTE 2580 W. HWY. 50		% MICHAEL LALIBERTI 2531 BOGGY CREEK F			
OCOEE FL 3	4761-3311	KISSIMMEE FL 34744	-	3. Date Incorporated or Qualifie	d 3a, Date of Last Report
		US		08/03/1989	04/11/1995
2. Principal Fla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
10872	W. Colonial Dr	26 Ocoee Fam	ily Medical	59-2963101	Not Applicable
Suite, Apt. ≢ 	#, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional
2  Oty & State		27 2531 Bogg	y Creek Roa	ad	Fee Hequired
	, Florida	City & State		Election Campaign Financing     Trust Fund Contribution	Anton makes
Zip	Country	Kissimmee	F1 Country	<del></del>	Added to Fees for intangible tax under s 199.032,
34761	25	29 34744	30		res No
	9. Name and Address of Curren			10. Name and Address of New	
			81 Name	a C Cauchat	
	TE, MICHAEL		82 Street A	na S. Gauchat ddress (P.O. Box Number is Not Accept	table)
	HIGHWAY 50		2533	Boggy Creek Roa	
OCOEF	FL 32761		83		
			<b>├  </b>		<b>85</b> Zip C∞le
			<b>84</b> City		
1 Porquant to	o the provisions of Sections 607.0502	and 607 1509 Florida Statute	I ار I	(issimmee	FL   34744
H. Pursuant to or registers	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric	and 607.1508, Florida Statute da. Such change was authorize	es, the above named con	<b>(issimmee</b> poration submits this statement for the poard of prectors. I be only accept the all	
racinilar wit	in, and accept the obligations of, Section	ion 607.0505, Florida Statutes	es, the above named con	poration submits this statement for the poard of a ectors. I have by accept the a	purpose of changing its registered offic ppcintment as registered agent. I am
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SIGNATURE: Diana S. Gauchat Signature and typed or printed name of signing officer on diffector

CR2E034 (12/95)