## 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 # L09906

(3)

DAVID WATKINS, L.M.H.C., P.A.

| FILED              |
|--------------------|
| May 05 1997 8:00am |
| Secretary of State |

| Principal Piace<br>8111 UNIVERSI<br>SUITE 725<br>CORAL SPRING | TY DRIVE   | 311<br>SUI  | Mailing Address 3111 UNVIERSITY DRIVE SUITE 725 CORAL SPRINGS FL 33065-5099                   |              |               |                     |                                   |  |   |  |                            |  |
|---|--|---|---|--------------|---------------|---------------------|-----------------------------------|--|---|--|----------------------------|--|
| US  |  |   | US  |              |               |                     | ŀ                                 | 3. Date Incorporated or Qualified 3a. Date of Last Report 08/18/1989 05/01/1996  |   |  |                            |  |
|   | ace of Business  | <u></u> ⊢¬  | 2a. Mailing Address   |              |               |                     |                                   | 4. FEI Number  |   | - <del></del>                                    | plied For                  |  |
| Sulte, Apt #, etc.  |  |   | 26  |              |               |                     |                                   | 65-0141299   |   | \$8.75 A   | t Applicable               |  |
| 22  |  | 27  | 27  |              |               |                     |                                   | 5. Certificate of Status Desired   |   | Fee Re   |                            |  |
| City & State  | )  | 1   | City & State  |              |               |                     |                                   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees                                       |   |  |                            |  |
| Zip   | Country  | 28  | Zip   | 1 Cc         | ountry        |                     |                                   | Trust Fund Contribution  | otangible                                 |  |                            |  |
| 24 25   |  | 29  | 29 30   |              |               | O. O. O. O.         |                                   | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes                                  |   |  |                            |  |
| <u> </u>  | 9. Name and Address of Curre   |   | ered Agent  |              | $\prod$       |                     | · · · · · · · · · · · · · · · ·   | 10. Name and Address of New Re   | gistered                                  | Agent  |                            |  |
|   | KINS, DAVID W  |   |   |              | 81            | Name                | 9                                 |  |   |  |                            |  |
|   | NE 50TH COURT  |   |   |              | 82 Street Add |                     |                                   | s (P.O. Box Number is Not Acceptab   | le)                                       |  |                            |  |
| LIGH  | THOUSE FL 33064  |   |   |              | 83            |                     |                                   |  |   |  |                            |  |
|   |  |   |   |              |               |                     |                                   |  |   |  | ,                          |  |
| į.  |  |   |   |              | 84            | City                |                                   |  | FL  | <b>85</b> Zip (                                  | Code                       |  |
| 12.   | Sucodo, typed or printed na door registered is OFFICERS A  | gent and the i  |   | 13           |               | rol 6 gnatur        | ic tednied                        | when reinstating) ADDITIONS/CHANGES TO OFFIC   | ERS ANI                                   | D DIRECTOR Change                                | S IN 12                    |  |
| NAME  | WATKINS, DAVID W   |   | [ Dtrrit  |              | NAME          |                     |                                   |  |   | L.J Gridings                                     | L_) Mudition               |  |
| STREET ADDRESS  | 2321 N.E. 50TH COURT   |   |   |              |               | ADDRESS             |                                   |  |   |  |                            |  |
| CITY-ST-ZIP   | LIGHTHOUSE POINT FL  |   |   | 1.4          | CITY-5        | ST-ZIF              |                                   |  |   |  |                            |  |
| TITLE   |  |   | [] DELETE   |              | 1111.E        |                     |                                   |  |   | Change   | [] Addilio                 |  |
| NAME<br>STOREST A PROCESS                                     |  |   |   |              | NAME.         | LADODERC            |                                   |  |   |  |                            |  |
| STREET ADDRESS<br>CITY-ST-ZIP                                 |  |   |   |              |               | I ADDRESS<br>ST-ZIP |                                   |  |   |  |                            |  |
| TITLE   | <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>   |   | DELETE  |              | TITLE         |                     |                                   |  |   | Change   | Additio                    |  |
| NAME  |  |   |   | 3.2          | NAME          |                     |                                   |  |   |  |                            |  |
| STREET ADDRESS  |  |   |   | 3.3          | STREE         | 1 ADDRESS           |                                   |  |   |  |                            |  |
| CITY-ST-ZIP<br>TITLE  |  |   | DELETE  |              | CHY-          | S1 - ZIP            | <del>-</del>                      |  |   | Change   | Additio                    |  |
| NAME  |  |   | tree is   |              | NAME          |                     |                                   |  |   | [ Orange   | C_) Additio                |  |
| STREET ADDRESS  |  |   |   | ı            |               | i address           | :                                 |  |   |  |                            |  |
| CITY-ST-ZIP   |  |   |   |              | Dily-9        |                     |                                   |  |   |  |                            |  |
| TITLE   |  |   | DELETE  | 51           | TITLE         |                     |                                   |  |   | Change   | Additio                    |  |
| NAME  |  |   |   | l l          | NAMŧ          |                     |                                   |  |   |  |                            |  |
| STREET ADDRESS  |  |   |   | 1            |               | I ADDRESS           | • [                               |  |   |  |                            |  |
| CITY-ST-Z#P<br>TITLE  |  |   | DELETE  |              | CITY !        | SI-ZIP              | <del> </del>                      | ang a garaga ang ang ang ang ang ang ang ang ang   |   | Change   | Addilio                    |  |
| NAME  |  |   |   |              | NAME          |                     |                                   |  |   | oningo   |                            |  |
| STREET ADDRESS  |  |   |   |              |               | 1 ADDRESS           |                                   |  |   |  |                            |  |
| CITY-ST-ZIP   |  | _   |   |              | CITY          |                     |                                   |  | _   |  |                            |  |
| 44   do boso  | by certify that the information suppling indicated on this annual report of flicer or director of the perporation in Block 12 or Block 16 changed, | ied with the<br>supplement<br>or the rece<br>or an an a | is filing does not que<br>ental annual report is<br>eiger or trustop emp<br>ytuchment with an | alify for th | 0.00          | amotion             | stated in<br>d that m<br>report a | i Section 119.07(3)(i), Florida Statute<br>y signature shall have the same lege<br>is required by Chapter 607, Florida S | s. I furtho<br>il effect a<br>statutes; a | r certify that<br>s if made und<br>and that my r | the<br>der oath; t<br>name |  |