1996	Sand Sec	EPARTMENT OF S dra B. Mortham cretary of State OF CORPORATIC				
DCUMENT # L42 Deporation Name JAMES P. FISCHER, M.D., P	· · ·)				
cipa' Place of Business BURTON W. WIAND ESO. DI CLEVELAND STREET #800 LEARWATER FL 34615	Mailing Address % BURTON W. W. 601 CLEVELAND S CLEARWATER FL	STREET #800		3. Date Incorporated or Qualified	3a. Date of I	.ast Report
rincipal Place of Business	2a. Mailing Address			01/08/1990 4. FEI Number	02/0	2/1995 Applied For
· · · · · · · · · · · · · · · · · · ·	26			59-2984319		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc			5. Certificate of Status Desired	• •	8.75 Additional Fee Required
Dity & State	City & State			 Election Campaign Financing Trust Fund Contribution 		\$5.00 May Be Added to Fees
2ip Country	Zip	Country	,	8. This corporation has liability fo	ir intangible tax ur es [1] No	
25 9 Name and Address of	29 Current Registered Agent	30		Florida Statutes Ye 10. Name and Address of New		ni
		81	Name			
WIAND, BURTON W.		82	Street Add	ress (P.O. Box Number is Not Accepta	able)	· ····
601 CLEVELAND STREET SUITE 800		83				
CLEARWATER FL 34617		84				15 Zip Code
CLEARWATER PL 34017			City			
Pursuant to the provisions of Sections 60) of Florida. Such change was auth	tatutes, the above the corp	pamed corpo	ration submits this statement for the p ard of directors. I hereby accept the ap	FL	ng its registered offic
Pursuant to the provisions of Sections 6 or registered agont, or both, in the State familiar with, and accept the obligations NATURE Signature, speed or prined name of registr OFFICE	of Florida. Such change was auth of, Section 607.0505, Florida Stat	tatutes, the above the corp	named corpo xoration's boa	ind or directors. Thereby accept the at	DATE FICERS AND DIF	ng its registered offic istered agent. I am
Pursuant to the provisions of Sections 60 or registered agont, or both, in the State familiar with, and accept the obligations of NATURE Signature, speed or prined name of registr OFFICE D FISCHER, JAMES P. 244 SHEFFIELD CIRC	of Florida. Such change was auth of, Section 607.0505, Florida Stat texest agent and title if aggituatile ERS AND DIRECTORS	Interest the above the corplanation of the cor	named corpo coration's boa	ed when reins strengt	Durpose of changing pointment as reg	ng its registered offic istered agent. I am RECTORS IN 12
Pursuant to the provisions of Sections 60 or registered agont, or both, in the State familiar with, and accept the obligations of NATURE Styrature, typed or prined name of regist OFFICE D FISCHER, JAMES P. 244 SHEFFIELD CIRCI PALM HARBOR FL	of Florida. Such change was auth of, Section 607.0505, Florida Stat texest agent and title if aggituatile ERS AND DIRECTORS	(NOTE Begistered Age (NOTE Begistered Age 13. 1.1 TILLE 1.2 NAME	named corpo coration's board ni signative require 1 ADDRESS 51-7/P	ed when reins strept	PL purpose of changing pointment as reg	ng its registered offic istered agent. I am RECTORS IN 12
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