FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N28924

(1)

BRANDON OUTREACH CLINIC, INC.

FILED Feb 24 1998 8:00am Secretary of State

Zip Code

Principal Place of Business	Mailing Address		r enacision had stade incide chita eldir dibit debit profit Bilbit debit didit	11 1881				
C/O CLIFTON CURRY JR 750 W LUMSEN RD BRANDON FL 33511 US	750 LUMSDEN RD Brandon FL 3351 US		3. Date Incorporated or Qualified 10/19/1988 4. FEI Number Applied For					
			59-2917499 Not Appl					
Principal Place of Business     1	28. Mailing Addre		o Continuate of States Desired	\$8.75 Additional Fee Required				
Suite, Apt. #, etc.	Suite, Apt. #, 6	etc.	Election Campaign Financing     Trust Fund Contribution     Added to Fees					
City & State	City & State		7. Is this nonprofit corporation a homeowners association?  Yes No					
Zip Country <b>25</b>	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	ie				
9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent					
CURRY, CLIFTON C. JR. 750 W. LUMSDEN ROAD BRANDON FL 33511		81 Name 62 Street A 83	Address (P.O. Box Number is Not Acceptable)					

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503. Florida Statutes.

and a second to the second to										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	OFFICERS AND DIRE	117	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	PD	☐ DÉLETE	1.1 TITLE	D	Change	<b>X</b> Addition				
NAME	CRAFT, JULIAN		1.2 NAME	BOWMAN, R. Ph., LARRY						
STREET ADDRESS	922 WEST BRANDON BLVD		1.3 STREET ADDRESS	1002 Hollyberry Court						
CITY-ST-ZIP	Brandon Fl		1.4 CITY-ST-ZIP	Valrico, FL 33594		l				
TITLE	SD	☐ DELETE	21 TITLE	D	☐ Change	<b>X</b> Addition				
NAME	FRIEDERICH, LAMBERT P		2.2 NAME	BROECKER, RAEAN	•					
STREET ADDRESS	1005 RAVONWOOD DR.		2.3 STREET ADDRESS	410 Summint Chase Dr.						
CITY-ST-ZIP	VALRICO FL		2. 4 CITY-ST-ZIP	Valrico, FL 33594						
TITLE	VD	DELETE	3.1 TITLE	D	☐ Change	Addition				
HAME	HAGUE, SUSAN B ARNP		3.2 NAME	DUPRE, IRVING		İ				
STREET ADDRESS	11904 SHADOW RUN BLVD		3.3 STREET ADDRESS	2706 Herndon St.						
CITY-ST-ZIP	RIVERVIEW FL		3.4. CITY-ST-ZIP	Valrico, FL 33594						
TITLE	TD	<b>X</b> ) DELETE	4.1 TITLE	D	Change	Addition				
RAME	JOHNS, EDWARD		4. 2 NAME	JOHNS, EDWARD						
STREET ADDRESS	1009 TRANQUIVIEW LN		4.3 STREET ADDRESS	1009 Tranquiview LN						
CITY-ST-ZIP	VALRICO FL		4.4 CITY-ST-ZIP	Valrico, FL 33594						
TITLE		☐ DELETE	5.1 TITLE	D	Change	X Addition				
NAME			5.2 NAME	GRIFFIN, EILEEN		i				
STREET ADDRESS			5.3 STREET ADDRESS	915 Oakfield Dr.						
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Brandon, FL 33511						
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change	Addition				
NAME			6.2 NAME	HAMPTON, HILDA						
STREET ADDRESS			6.3 STREET ADDRESS	117 Gornto Lake Road						
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Brandon, FL 33510						

I hereby certify that the Information supplied with his 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 or supplier on the following the fo

SIGNATURE:

2/17/58 813 681 3480

£	FILE	<u>NÜW: FILIN</u>	IG FEE 18	\$61.2	5		CUN.	- LTMUATI(	VIC				
• COF	ONPROFIT RPORATION JAL REPORT 1998			RIDA DEPAF Sandra B Secretar IVISION OF C	. Mortha ry of State	m							
DOCU I. Corporation	MENT #	N28924	1	(1)									
		CH CLINIC, INC	<b>)</b> ,										
Principal Plac	e of Business		Mailing Add	ress					INIMI MIS NIMBI LÄNI	. 16118 11511 8		II DIXII DIBA 1	(E4) E1E() (E E)
C/O CLIFTON 750 W LUMSE BRANDON FL US	N RD		750 LUMSDE Brandon Fé US		•			4. FEI Nun	porporated or 19/19/1988 hber 2917499	Qualified		-	oplied For
2. Principal F	Nace of Business		2a. Mailing /	Address				1	te of Status D	esired		\$8.75	Additional equired
Suite, Apl.	#, etc.		Suite, Ap	t. #, etc.					Campaign Fir			\$5.00	
City & Stat	te :		City & St	ate				<del> </del>	nd Contributio			Added to	
23			28		1			ļ <u>.</u>			Yes [	] No	
Zip 24	25	ountry	Zip 29	unt	Count 30			Persona	poration owes I Properly Tax Ind Address o	due June	30. E	Yes [	tangible No
	J. 110/110 A110 P	donate of outfort	riogratorou rigi		e	1 Nam	e	10, 1441110 4	na realiss (	11001110	9,0,0,00	.9	
	CLIFTON C. JR				8	2 Stree	t Addre	ss (P.O. Box	Number is Not	Acceptab	ia)		
	Lumsden roai On FL 33511	)				3		<u></u>					
OFFICE	ON 1 E 33311					4 City	·					les l Zio	Code
											<u>FL</u>		
11. Pursuant office or i	to the provisions or registered agent, o	f Sections 617.0502 r both, in the State o d accept the obligati	and 617.1508, F I Florida, Such d	Florida Statut change was a	es, the abo authorized	by the co	ed corpo orporatio	oration submit on's board of	s this stateme directors. I her	nt for the p eby accep	urpose of at the appo	changing i pintment as	ts registered registered
SIGNATURE	sii) lailungi wiiri, ari	o accept the obligati	ions of, Section	017.03Q3, mQ	Jinua Statut	<b>6</b> 5.							
	Signature, typed or printe	of name of registered agent		(NOT)		gent signati	re required	when reinstating)	NS/CHANGES	TO OFFIC	DATE	DIRECTO	2C IN 10
12.	T PD	OFFICERS AND		DELETE	13.		T/1		NS/CHANGES	10 OFFIC	ENS AND	Change	Addition
NAME	CRAFT, JULIA	AN .	_		1.2 NAM				, JOHN	E.			221
STREET ADDRESS		RANDON BLVD			1.3 STRE	ET ADDRESS		O. Box		"N/A	. 11		
City-St-ZIP	BRANDON F				1.4 CITY	-\$1-ZIP	Br	andon,	FL 33	509			
TITLE	SD		L	DELETE	2.1 TITLE		D					Change	K Addition
NAME	i Friederich, i 1005 ravon				2.2 NAM		1	AVERM		- Dead			
STREET ADDRESS CITY-ST-ZIP	VALRICO FL	WOOD DA.				et address - St - Zip			erbroo! FL 33!		ve		
TITLE	VD			DELETE	3.1 TITLE		D	unaon,	<u> 1                                   </u>	<u> </u>	70	☐ Change	Addition
NAME	HAGUE, SUS	AN B ARNP			3.2 NAM	E	WO	LFE, W	ILLIAM				
STREET ADDRESS	1	OW RUN BLVD			3.3 STRE	ET ADDRESS		B Dali					
CITY-ST-ZIP	RIVERVIEW F	<u></u>		DELETE		-ST-ZIP	Br	andon.	FL 33	511		Change	Addition
TITLE NAME	JOHNS, EDW	'ARD	L.	ין אנגנונ	4.1 TITLE 4. 2 NAA		1					L. Crizinge	LI ADOILOR
STREET ADDRESS	1009 TRANO					et address	s l						
CITY-ST-ZIP	VALRICO FL				4.4 CITY	-\$1-ZIP							
TITLE				DELETE	5.1 TITLI							Change	Addition
NAME	i				5.2 NAM		.						
STREET ADDRESS	ļ	•			•	ET ADORESS	8 [						
CITY-ST-ZWP TITLE	<del> </del>		·	DELETE	6.1 TITL	-ST-ZIP	+-					Change	Addition
NAME	ļ		_		6.2 NAM		l					-	=
STREET ADDRESS	ĺ				6.3 STR	ET ADDRESS	s						

64 CITY-51-ZIP

14. I hereby certify that the information supplied 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FILE NOW: FILING FEE IS \$61.25

SIGNATURE:

CONTINUATION

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		NONPROFIT  FLORIDA DEPARTMENT OF STA				TATE				
[		ORPORATION Sandra B. Mort			3. Mortham					
ĺ		UAL REPORT Secretary of State								
	'	1998	TO THE	DIVISION OF	CORPORATIO	NS				
F		MENT	# N0000	(4)						
ŀ.	Corporatio	MENT n Name	# N28924	1 (1)						
]	BRANC	ON OUT	REACH CLINIC, INC	<u>,                                     </u>			1			
Pr	incipal Plac	e of Busines	<b>S</b>	Mailing Address				I BADA GABA BABA DADA	ANN DUBIT TOOL	
l cA	O CLIFTON	CURRY JR		750 LUMSDEN RD	•		3. Date Incorporated or Qualified			
	OW LUMSER			BRANDON FL 33511			10/19/1988			
US	ANDON FL :	S311		U\$			4. FEI Number	] A	Applied For	
							59-2917499		lot Applicable	
2. 21	Principal P	lace of Busin	ess	2a. Mailing Address			5. Certificate of Status Desired		Additional Required	
1	Suite, Apt	#, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00	May Be	
22	City & Stat	<del></del>		City & State					to Fees	
23	City & Stat	B		28			7. Is this nonprofit corporation a homeowners association?			
١	Zip		Country	Zip	Country		8. This corporation owes or has paid	<del></del>		
24		9. Name	25 and Address of Current	29 Registered Agent	30		Personal Property Tax due June 3  10. Name and Address of New Regi		∐ No	
-		0			81	Name			· · · · · · · · · · · · · · · · · · ·	
	CURRY.	<b>CLIFTON</b>	C. JR.		82	Street A	Address (P.O. Box Number is Not Acceptable		<del> </del>	
		LUMSDEN				0110017	duress (F.O. Dox Humber is Not Acceptable	·/		
	BRANDO	ON FL 3351	1		83					
}					84	City	·	- 85 Zip	Code	
44	Distance	o the provide	ann of Continue 617 0502	and 617 1509 Florida Stated	loo tho chave	named .	paragration cultimits this atolement for the nur	FL   O   -	ito conTotocod	
l ''	office or r	egistered ag	ent, or both, in the State of	f Florida. Such change was a	authorized by	the corp	corporation submits this statement for the pur oration's board of directors. I hereby accept	the appointment a	s registered	
ı	GNATURE .	in taitillar wi	in, and accept the congan	ons of, Section 617,0505, Fr	onga Siaiules	•				
_		Signature, typed	or printed name of registered agent			d signatura i	required when reinstating)	DATE		
12		PD	OFFICERS AND	DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICE	Change		
		CRAFT,	JULIAN	<u> </u>	1.2 NAME		HOLLAND, JOHN			
STREET ADDRESS 922 WEST BRANDON BLVD			1.0 011EC1 (DD11E00 -		1012 Classic Drive					
СП	Y-S1-ZIP	BRANDO	ON FL		1.4 CITY - ST	- ZIP	Valrico, FL 33594			
TIT	LE	SD		☐ DELETE	2.1 TITLE	l l	D	☐ Change	X Addition	
1	ME		RICH, LAMBERT P		2.2 NAME		JEANSONNE, M.D., PATRICI	IA		
	REET ADORESS	VALRICO	VONWOOD DR.		2.3 STREET		602 Vonderburg Dr. Brandon, FL 33511			
TIT	Y-ST-ZIP 1.E	VD	/ T L	☐ DELETE	2. 4 CITY-ST 3.1 TITLE	- 1	D Brandon, FL 33311	Change	Addition	
ı	ME		SUSAN B ARNP		3 2 NAME		KAPATKIN, MAUREEN	<u></u>	#B	
ST	REET ADDRESS	11904 S	HADOW RUN BLVD		3.3 STREET A		4601 Clarksdale Lane			
	Y-ST-ZIP	RIVERVI	W FL		3.4. CITY-S	- 2IP	Brandon, FL 33511			
TIT		D	EDWADD.	☐ DELETE	4.1 TITLE		C/T		XIX Addition	
	ME Reet adoress		EDWARD ANQUIVIEW EN		4. 2 NAME		PARKS, M.D., STEPHEN	to B		
	reet aduress TY-ST-ZIP	VALRIC(			4.3 STREET A		205 Buckingham Place, St Brandon, FL 33511	CC. D		
In		7. 20110		DELETE	5.1 TITLE		D D	Change	X Addition	
l	ME				5.2 NAME		SANCHEZ, EVELYN	_		
ST	REET ADDRESS				5 3 STREET		401 N. Bryan Circle			
_	Y-ST-ZIP			T No. and	54 CITY-ST	- ZIP	Brandon, FL 33511		3.00 P + + 100	
711				☐ DELETE	61 TITLE	1	D COMPONENT AND THE	LJ Change	XX Addition	
NA.					62 NAME		SCHOONMAKER, ANNE			
(	REET ADDRESS IY-ST-ZIP				63 STREET 64 CITY - ST	JIP	119 Oakfield Drive Brandon, FL 33511			
14	. I hereby o	ertify that th	information supplied with	this filing does not qualify f	or the exempt	ion state	d in Section 119.07(3)(i). Florida Statutes, I fu	irther certify that th	e information	
	indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in									
	Plant 12	nr Block 13 i	changed, or on an attach	ment with an address			·	•	-	