2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N41600						FILED May 01, 2001 08:00 AM				
1. Entity Name					- I	ecretary o				
Principal Place 6512 MAN O' V TALLAHASSEI 32308	WAR TRAIL	Mailing Address 6512 MAN O' WAR TRAIL TALLAHASSEE 32308	US	- FL						
•	lace of Business	3. Mailing Address P. O. BOX 13632		·				·		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		FL	4. FEI Num 59-305		 .		plied For t Applicable	
Zip 32308	Country	Zíp 32317	Cou	intry	1.5	te of Status Desired		8.75 Add	itional	
BERWHAR 6512 MAN (6. Name and Address of Current T MARGARET D' WAR TRAIL	Registered Agent			ART MARGAR	nd Address of New Re ET ber is Not Acceptable)		gent		
TALLAHASSEE FL 32308				City TALLAI	LAHASSEE FL Zip Code 32308					
SIGNATURE .	named entity submits this statement for stat			·	registered agent, or c	ioin, in the state of Fior	05/01/2	2001		
	FILE NOW: FEE IS \$61.25	Financii ution.	ng .	\$5.00 May Be Added to Fees Make Check F						
10.	OFFICERS AND DIE		11.		ADDITIONS/C	HANGES TO OFFICER	S AND DIR	ECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALONE DIANA 3725 SULTON CT TALLAHASSEE	☐ Delete	1		VD MALONE DI 3725 SULTON CT TALLAHASSEE	IANA		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RYLL FRANK 4035 DEVLIN CT TALLAHASSEE	☐ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WELCH JUDY 9560 LEE REEVES RD	☐ Delete	TITLE NAM STRE	E EET ADDRESS				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DATILLIO RALPH 6579 PISQAH CHURCH RD TALLAHASSEE	FL 32308 FL 32308	TITLE NAM STRE						Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	M BERNHART MARGARET 6512 MAN O TALLAHASSEE	☐ Delete FL 32308	TITUE NAM STRE	Ē	M/D BERNHART 6512 MAN O WAR T	MARGARET FRAIL		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP	LALLAHAMEE	□ Delete	TITLE NAM STRE	Ε	IALLAHASSEE	-		Change	☐ Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

MARGARET E. BERNHART

MD

05/01/2001

Davtime Phone #

ANDY MULLINS, DIRECTOR 2156 E. PARK AVENUE

TALLAHASSEE, FL 32301

AUDREY BUTLER, DIRECTOR 4025 1/2 TIMER LANE AVENUE

ORLANDO, FL 32804