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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

1999

## DOCUMENT # N9200000368

1. Corporation Name

Suite, Apt. #, etc.    Suite, Apt. #, etc.	206 SE SECOND ST DELRAY BEACH FL 33483 US  2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country Second ST DELRAY BEACH FL 33483 US  3. Date Incorporated or Qualifed 10/30/1992 4. FEI Number 65-0379999 Not S8.75 A Fee Rec S8.75 A Fee Rec S8.75 A Fee Rec Second ST City & State Suite, Apt. #, etc. Sign Country Second ST	lied For Applicable dditional juired May Be
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9. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent   10. Name   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and A	24 25 29 30 Trust Fund Contribution Added to  9. Name and Address of Current Registered Agent  81 Name  Name	
9. Name and Address of Current Registered Agent  HENRY, DANIELLA 206 SE SECOND ST DELRAY BEACH FL 33483  32 Street Address (P.O. Box Number is Not Acceptable)  33 Street Address (P.O. Box Number is Not Acceptable)  34 City  FL 85 Zip Code  35 Street Address (P.O. Box Number is Not Acceptable)  36 Street Address (P.O. Box Number is Not Acceptable)  37 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  39 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  31 Street Address (P.O. Box Number is Not Acceptable)  32 Street Address (P.O. Box Number is Not Acceptable)  33 Street Address (P.O. Box Number is Not Acceptable)  34 City  FL 85 Zip Code  35 Street Address (P.O. Box Number is Not Acceptable)  36 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  38 Street Address (P.O. Box Number is Not Acceptable)  39 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  30 Street Address (P.O. Box Number is Not Acceptable)  31 Street Address (P.O. Box Number is Not Acceptable)  32 Street Address (P.O. Box Number is Not Acceptable)  33 Street Address (P.O. Box Number is Not Acceptable)  34 City Street Address (P.O. Box Number is Not Acceptable)  35 Street Address (P.O. Box Number is Not Acceptable)  36 Street Address (P.O. Box Number is Not Acceptable)  36 Street Address (P.O. Box Number is Not Acceptable)  37 Street Addres	9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name	Fees
HENRY, DANIELIA 206 SE SECOND ST DELRAY BEACH FL 33483  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registering event, or popular lateral provisions of Sections 617.0502 and 617.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registering event, and the provisions of Sections 617.0502 and 617.1509. Florida Statutes.  SIGNATURE  SIGNATURE  TO PROVIDE STATE OF PROVIDED AND CONTROL OF THE STATE		
206 SE SECOND ST DELRAY BEACH FL 33483  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-hamed 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 epoletiment as registered agent, and an application of Sections 617.0502, Florida Statutes, the above-hamed 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 epoletiment as registered agent, and application of the corporation's board of directors. I hereby accept the purpose of changing its registered office or registered agent, and application of the corporation's board of directors. I hereby accept the epoletiment as registered agent, and application of directors. I hereby accept the epoletiment as registered agent, and application of directors. I hereby accept the epoletiment as registered agent, and application of directors. I hereby accept the epoletiment as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent, and application of directors. I hereby accept the epoletiment as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent as the supplication of directors. I hereby accept the epoletiment as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent as registered agent as the corporation's board of directors. I hereby accept the epoletiment as registered agent as the corporati		
DELRAY BEACH FL 33483  B3 B4 City FL B5 Zip Code  T1. 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, and the provisions of, Section 617.0503, Florida Statutes.  SIGNATURE Signa		
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, and expert the optications of, Section 617.0503, Florida Statutes.  SIGNATURE		
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SIGNATURE    12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   14. TITLE   Change   Addition   Additio	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement to the purpose of changing in a 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, 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, or both.	istered
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12.	SIGNATURE Signature are a conference of projective area of and title if any other projective depart and title if any ot	<del>]</del>
INTEL	APPITIONS OF TO OFFICERS AND DIRECTO	RS IN 12
STREET ADDRESS   212 S.W. 2ND AVENUE   13 STREET ADDRESS	TITLE TP DELETE 1.1 TITLE Change	☐ Addition
CITY_ST-ZP	NAME ZIMMERMAN, CAROLYN 1.2 NAME	
TITLE		
NAME	Change	Addition
STREET ADDRESS  CITY-ST-ZIP  PALM SPRINGS FL 33461  TITLE  DS  NAME  HARRIS, MICHAEL P  STREET ADDRESS  CITY-ST-ZIP  DELRAY BEACH FL  TITLE  DAS  MARRAY, ROSALIND  STREET ADDRESS  CITY-ST-ZIP  DELRAY BEACH FL  TITLE  DAS  STREET ADDRESS  CITY-ST-ZIP  DELRAY BEACH FL  TITLE  DAS  STREET ADDRESS  CITY-ST-ZIP  DELRAY BEACH FL  DELETE  STREET ADDRESS  CITY-ST-ZIP  DELRAY BEACH FL  DELETE  STREET ADDRESS	Al Seed and Al	C Addition
CITY-ST-ZIP		
TITLE DS DELETE 3.1 TITLE 3.2 NAME  NAME HARRIS, MICHAEL P 3.2 NAME  STREET ADDRESS 631 LINDEL BLVD. 3.3 STREET ADDRESS  CITY-ST-ZIP DELRAY BEACH FL 3.4 CITY-ST-ZIP  TITLE DAS DELETE 4.1 TITLE  NAME MURRAY, ROSALIND  STREET ADDRESS 491 VILLAGE BLVD. 4.2 NAME  TITLE DS DELRAY BEACH FL 4.4 CITY-ST-ZIP  TITLE DS DELRAY BEACH FL 5.1 TITLE  NAME LOUISSAINT, EDDY M.D. 5.2 NAME  STREET ADDRESS 990 S. CONGRESS AVENUE #3  DELRAY BEACH FL 33445		
NAME HARRIS, MICHAEL P  STREET ADDRESS CITY-ST-ZIP  DELRAY BEACH FL  DAS  MURRAY, ROSALIND  4.2 NAME  STREET ADDRESS CITY-ST-ZIP  DELRAY BEACH FL  DELETE  4.4 CITY-ST-ZIP  DELRAY BEACH FL  DS  STREET ADDRESS  LOUISSAINT, EDDY M.D.  STREET ADDRESS		Addition
STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL  OBLETE Addition  NAME MURRAY, ROSALIND STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL  OBLETE A1.1 TITLE A2. NAME A3. STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL  OBLETE A4. CITY-ST-ZIP  OBLETE A4. CITY-ST-ZIP  OBLETE A4. CITY-ST-ZIP  OBLETE Addition  Change Addition  Change Addition  Change Addition  STREET ADDRESS A4. CITY-ST-ZIP  OBLETE S1. TITLE S2. NAME STREET ADDRESS		,
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NAME         MURRAY, ROSALIND         4.2 NAME           STREET ADDRESS         491 VILLAGE BLVD.         4.3 STREET ADDRESS           CITY-ST-ZIP         DELRAY BEACH FL         4.4 CITY-ST-ZIP           ITILE         DS         □ DELETE         5.1 TITLE         □ Change         □ Addition           NAME         LOUISSAINT, EDDY M.D.         5.2 NAME         5.2 NAME           STREET ADDRESS         590 S. CONGRESS AVENUE #3         5.3 STREET ADDRESS           CITY ST-ZIP         DELRAY REACH FL 33445         5.4 CITY-ST-ZIP	Change	
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CITY ST. 789 DELRAY REACH EL 33445	NAME LOUISSAINT, EDUT M.D.	
PRIV CT.789   TIPL MAY REAL HET 339445	STREET ADDRESS 330 3. CONTINUE #3	
Change   Addition	CITY-ST-ZIP   DELNAY BEACH FL 33445	
THE DAS	NAME MURRAY, ROSELIND	

CITY-ST-ZIP

DELRAY BEACH FL 33445

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 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 12 or Block 13 if changed, or on an attachment with an address, withyall other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS 491 VILLAGE BLVD.

**FILED** 

03-01-1999 90086 011 \*\*\*\*61.25

Mar 01, 1999 8:00 am \$ Secretary of State