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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

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OKALOOSA MEDICAL ASSISTANCE CENTER, INC.

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Jul 18, 1996 08:00 AM
Secretary of State

	HAN BOND BRUU BRAN	

Principal Place of	of Business	Mailing Address				18111 Mitte Garde benne con.	
%JAMES G. ETHEREDGE %JA 226 TROY ST., NE 226		%JAMES G. ETHER 226 TROY ST., N.E.					
			FT. WALTON BEACH FL 32548		3. Date Incorporated or Qualified 02/26/1993	3a. Date of Last 03/09/1	
	ace of Business	2a. Mailing Address			4. FEI Number 59-3206653	<u> </u>	Applied For Not Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	28 Zip	Count	ry	8. This corporation has liability for in	ntangible tax under s	
4	25	29	30		Florida Statutes L. 10. Name and Address of New Re	Yes No	
1	9. Name and Address of Curre	ant Registered Agent		Name	10. Name and Address or non	Gisteran was	
			10				
	EDGE, JAMES G Dy St., N.E.		8	32 Street Add	dress (P.O. Box Number is Not Acceptable	э)	
	LTON BEACH FL 32548		\{	33			
1 1. Tr. m	LION DENOTITE CO.		ī	84 City		FL 85 Z	ip Code
<u> </u>		20 -cd 617 1508 Florida St	tatistes the abov	e-named corp	oration submits this statement for the purp pard of directors. Thereby accept the appo	accord changing its	registered off
familiar wi	ith, and accept the obligations of, Se	ection 617.0503, Florida Stat	tutes.		oration submits this statement for the purp pard of directors. I hereby accept the appo		
PICKIASIO	Signature, typed or printed name of registered ag			Agent signature requ	ired when reinstating)	DATE ICERS AND DIRECT	ORS IN 12
CICNIATI IDE	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECT	ORS IN 12
SIGNATURE	OFFICERS A	AND DIRECTORS DELETE	13.	LE	P /D ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	ORS IN 12
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