


FILE NOW: FILING FEE IS \$61.25

FILED

May 13 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000003400 (8)**

1. Corporation Name

**PALM BEACH PROFESSIONAL PHARMACEUTICAL REPRESENT  
ATIVES' ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**1318 13TH LANE  
PALM BCH GRDNS FL 33418  
US**

**1318 13TH LANE  
PALM BCH GRDNS FL 33418  
US**



2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified

**07/05/1994**

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

Trust Fund Contribution

☐

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANDREAS, ELISE  
1318 13TH LANE  
PALM BCH GRDNS FL 33418**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**DP  
NAME ANDREAS, ELISE  
STREET ADDRESS 1318 13TH LANE  
CITY-ST-ZIP PALM BEACH GARDENS FL**

1.1 TITLE ☐ Change ☒ Addition

**DT  
NAME AMY BAPTISTE  
1.2 NAME  
1.3 STREET ADDRESS 202-E PINECREST CIRCLE  
1.4 CITY-ST-ZIP JUPITER FL 33458**

TITLE ☒ DELETE

**D  
NAME HIPPLER, SANDRA  
STREET ADDRESS 2551 PEPPERWOOD CIRCLE  
CITY-ST-ZIP PALM BEACH GARDENS FL**

2.1 TITLE ☐ Change ☒ Addition

**DV  
2.2 NAME CAROL THOMAS  
2.3 STREET ADDRESS 5385 CEDAR LAKE CD.#1525  
2.4 CITY-ST-ZIP BOYNTON BEACH FL 33437**

TITLE ☒ DELETE

**DT  
NAME STEADMAN, SARAH  
STREET ADDRESS 1403 14TH WAY  
CITY-ST-ZIP W PALM BCH FL**

3.1 TITLE ☐ Change ☒ Addition

**DS  
3.2 NAME DEBORAH ESPERTO  
3.3 STREET ADDRESS 3047 CASA RIO COURT  
3.4 CITY-ST-ZIP PALM BEACH GARDENS FL 33418**

TITLE ☐ DELETE

**D  
NAME STEINHARDT, IRA  
STREET ADDRESS 5377 GRAND PARK PL  
CITY-ST-ZIP BOCA RATON FL 33488**

4.1 TITLE ☐ Change ☐ Addition

**4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP**

TITLE ☒ DELETE

**DV  
NAME DONDOYANO, BOB  
STREET ADDRESS 712 LEMONGRASS LANE  
CITY-ST-ZIP WELLINGTON FL**

5.1 TITLE ☐ Change ☐ Addition

**5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP**

TITLE ☒ DELETE

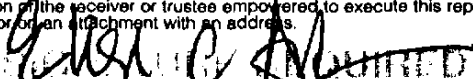
**DS  
NAME BLANKENSHIP, BARBARA  
STREET ADDRESS 2014 NORMANDY CIRCLE  
CITY-ST-ZIP W PALM BCH FL**

6.1 TITLE ☐ Change ☐ Addition

**6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 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 as an attachment with an address.

SIGNATURE:



4/28/98

501.694.2578

CP2E037 (10/97)