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May 01 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000005991 (4)**

1. Corporation Name

BRECKENRIDGE PROFESSIONAL CENTER, INC.

Principal Place of Business

Mailing Address

19850 S. TAMAMI TRAIL
ESTERO FL 33928

19850 S. TAMAMI TRAIL
ESTERO FL 33928

3. Date Incorporated or Qualified

12/05/1994

4. FEI Number

65-0584264

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 19850 Breckenridge Dr.
Suite, Apt. #, etc.

26 19850 Breckenridge Dr.
Suite, Apt. #, etc.

22 ~~EST~~ Ste. A

27 Ste. A

City & State

City & State

23 Estero, FL

28 Estero, FL

Zip

Country

Zip

Country

24 33928

25 USA

29 33928

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOTURCO, JOSEPH D
19850 BRECKENRIDGE DR.
ESTERO FL 33928

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

1.1 TITLE ☒ Change ☐ Addition

NAME LOTURCO, JOSEPH D
STREET ADDRESS 19850 S. TAMAMI TRAIL
CITY-ST-ZIP ESTERO FL 33928

1.2 NAME
1.3 STREET ADDRESS 19850 Breckenridge Dr, Ste A
1.4 CITY-ST-ZIP Estero, FL 33928

TITLE ☐ DELETE

2.1 TITLE ☒ Change ☐ Addition

NAME NICOLLA, JOSEPH R
STREET ADDRESS 19850 S. TAMAMI TRAIL
CITY-ST-ZIP ESTERO FL 33928

2.2 NAME
2.3 STREET ADDRESS 19850 Breckenridge Dr, Ste A
2.4 CITY-ST-ZIP Estero, FL 33928

TITLE ☐ DELETE

3.1 TITLE ☒ Change ☐ Addition

NAME BETTE, KEVIN M
STREET ADDRESS 19850 S. TAMAMI TRAIL
CITY-ST-ZIP ESTERO FL 33928

3.2 NAME
3.3 STREET ADDRESS 19850 Breckenridge Dr, Ste A
3.4 CITY-ST-ZIP Estero, FL 33928

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

TITLE

4.2 NAME

NAME

4.3 STREET ADDRESS

STREET ADDRESS

4.4 CITY-ST-ZIP

CITY-ST-ZIP

TITLE

5.1 TITLE

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE

6.1 TITLE

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

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 on an attachment with an address.

SIGNATURE:

(Signature)

4/22/98

CR2E037 (10/97)