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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N98000002534

1. Corporation Name

MEDICAL ENGINEERING VOLUNTEERS OF FLORIDA, INCORPORATED

Principal Place of Business

209 S. NASSAU STREET, SUITE 101  
VENICE FL 34285

Mailing Address

209 S. NASSAU STREET, SUITE 101  
VENICE FL 34285



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

05/04/1998

4. FEI Number

65-0854519

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

WILLIAMS, ROBERT L  
209 S. NASSAU STREET, SUITE 101  
VENICE FL 34285

10. Name and Address of New Registered Agent

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

TITLE D  
NAME PATE, CHARLES M  
STREET ADDRESS 628 GARDENIA DRIVE  
CITY-STATE-ZIP VENICE FL 34285

TITLE D  
NAME PIERCE, DAVID W  
STREET ADDRESS 1111 DEARDON DRIVE  
CITY-STATE-ZIP VENICE FL 34292

TITLE D  
NAME DIEHM, RON  
STREET ADDRESS 1063 VENETIAN PARKWAY  
CITY-STATE-ZIP VENICE FL 34292

TITLE D  
NAME PARK, JAMES  
STREET ADDRESS 308 PARKDALE DRIVE  
CITY-STATE-ZIP VENICE FL 34285

TITLE D  
NAME WILLIAMS, ROBERT L  
STREET ADDRESS 1343 LUCAYA AVENUE  
CITY-STATE-ZIP VENICE FL 34292

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-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, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24, 1999 941-484-6056

Date

Daytime Phone #

CR2E037 (1/98)