PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # P28860



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Katherine Harris

FILED

99 MAR 10 PM 12: 21

SCORETARY OF STATE

FHC OF	PTIONS, INC.				
					i Bigil Bigil Bigil Bigil Bigil Bigil
Dringing Dine	ce of Business	Mailing Address		[ 16611641 118 11861 16161 16148 61411 6614 6141	i Babin Birin Birin Birin Birin 1881
		-			
240 CORPORATE BLVD. 240 CORPORATE BLVD. STE. 400 STE. 400					
NORFOLK VA 23502 NORFOLK VA 23502			DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed	
				04/05/1990	
2. Principal F	Place of Business	2a. Mailing Address		4. FE1 Number	Applied For
21		26		54-1414194	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
<del>-</del>		City & State		6, Election Campaign Financing	<b>\$5.00</b> May Be
<b>23</b>   Zip	Country	.   <b>28</b>	Country	Trust Fund Contribution	Added to Fees
24	<b>F</b> 1	h r	io]	8. This corporation owes the current year h Personal Property Tax	ntangible []No
24	25   9. Name and Address of Curre		101.	10. Name and Address of New Registered	
			81 Name	to, italia gila padros o ito ito gioraio.	2 7 gen
THE	PRENTICE-HALL CORPORATIO	N SYSTEM			
1201 HAYS STREET			82 Street Add	fress (P.O. Box Number is Not Acceptable)	į
TAL	LAHASSEE FL 32301		83	500002801	<u> </u>
				-03/16/99	01050 - 003
			B4 City	****150.0 <u>0</u>	PARTY SECTION
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statutes	I . I . s. the above-named con	poration submits this statement for the purpose of	of changing its registered
office or i	registered agent, or both, in the State	of Florida, Such change was autops of Section 607,0505, Florida	horized by the corporati	poration submits this statement for the purpose c ion's board of directors. I hereby accept the appo	ointment as registered
	in familiar with, and accept the oring.	States of Section 607.0303, Figure	an Otautes		
SIGNATURE	Signature, typed or printed name of registern-Lage	entand the Way plantie (NOTE A	te jistered Apent soji abire re pot	e fiwher remaining) PAIt	
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	[ ] DELFTE	117015		[   Change   [   Addition
NAME	DOZORETZ, MD R I		1.2 NAME		l
STREET ADDRESS	240 CORPORATE BLVD.		13 STREET ADDRESS		ļ
CITY-ST-ZIP	NORFOLK VA 23502		14 CHY-SI-ZF		
TITLE	∖ VP	( ) DELETE	2 1 Tille		[ ] Change [ ] Addition
NAME	IRBY, JR E C		2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	NORFOLK VA 23502		2 4 CHY-ST-ZIP		
TITLE	S	[] DELETE	3 1 TITLE		[   Change   [   Addition
NAME	NUSS, GLORIA J		3.2 NAME		
STREET ADDRESS	1		3.3 STREET ADDRESS		
CITY-ST-ZIP	NORFOLK VA 23502		34 CITY-\$1-7P		
TITLE	CEO	[ ] DELETE	4 1 Tilluf		[   Change
NAME .	RONALD I DOZORETZ, MD		4 2 NAME		
STREET ADDRESS	240 CORPORATE BLVD		43 STREET ADDRESS		}
CITY-ST-ZIP	NORFOLK VA 23502		4.4 City-St-Ziff		
TITLE	T	[   DELETE	51 TITLE		[ ] Change [ ] Addition
NAME	MICHAEL A TAYLOR		5.2 NAME		İ
STREET ADDRESS	1		53 STREET ADDRESS		
CITY-ST-ZIP	NORFOLK VA 23502		54 CITY-ST-ZIP		
TITLE	VP	[ ] DELETE	617ITEF		[   Change
NAME	FOWLS, DON J M.D.		6.2 NAME		
STREET ADDRESS	240 CORPORATE BLVD.		63 STREET ADDRESS		/a 1

14. I hereby certify that the information supplied with this filing does not qualify fur 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 togal 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 697. 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: \_\_\_

CITY-ST-ZIP

Edward C. Irby, Jr.

1-21-94 (757)459-5200.

CR2E034 (11/98)