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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000010719 (2)

HEATHER L. CHILDERS, D.D.S., A PROFESSIONAL ASSO CIATION

Principal Place of Business

Mailing Address

FILED Mar 31 1998 8:00am Secretary of State



1850 SAND LAKE RD #305 1650 SAND LAKE RD #305 ORLANDO FL 32809 ORLANDO FL 32909 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/10/1992 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 59-3155461 Not Applicable Suite Apt # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 ∏ No Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHILDERS, HEATHER L 81 1650 SAND LAKE ROAD #305 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32809 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE Signature: typod or printed name of registered agent and tille if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change CHILDERS, HEATHER L NAME 1.2 NAME 1650 SAND LAKE RD #305 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE 2.1 TITLE Change Addition FLEMM, JACK NAME 2.2 NAME 1650 SAND LAKE RD #305 STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-ST-7/P 2. 4 CITY - ST- ZIP DELETE TITLE 3.1 TITLE Addition ☐ Change NAME **3.2 NAME** STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE . Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 truelon empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address