

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000022418 (6)

1. Corporation Name

EAST ORLANDO DIALYSIS, INC.

Principal Place of Business

3885 OAKWATER CIRCLE
ORLANDO FL 32806

Mailing Address

3885 OAKWATER CIRCLE
ORLANDO FL 32806



3. Date Incorporated or Qualified
03/16/1993

3a. Date of Last Report
03/15/1995

4. FEI Number

59-3172504

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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 607.0502 and 607.1502, 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 typed or printed name of registered agent or director (if applicable)

(If not, Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

HOLCOLM, ALLEN K
3885 OAKWATER CIRCLE
ORLANDO FL 32806

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

SD

STONEROCK, ROBERT F JR.
3885 OAKWATER CIRCLE
ORLANDO FL

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

PD

MARBURY, THOMAS C
3885 OAKWATER CIRCLE
ORLANDO FL

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D

ABBOTT, LIONEL C
3885 OAKWATER CIRCLE
ORLANDO FL 32806

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D

PRINCE, TIMOTHY L
3885 OAKWATER CIRCLE
ORLANDO FL 32806

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D

HOLT, SHAMUS M
3885 OAKWATER CIRCLE
ORLANDO FL 32806

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHAMUS HOLT

01-19-96

407-438-9509

CR2E034 (12/95)