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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300050225

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90003 049 ***150.00

Principal Place of Business 88 E CALL ST. STARKE FL 309H 2. Milling Address 3. Date Incorporated or Quarified 077/19/1983 2. Principal Place of Business 2. Milling Address 3. Date Incorporated or Quarified 077/19/1983 2. Principal Place of Business 3. Date Incorporated or Quarified 077/19/1983 2. Principal Place of Business 3. Date Incorporated or Quarified 077/19/1983 3. Date Incorporated or Quarified 077/19/1983 4. FEEL Number 5. Software 5. Software 5. Software 5. Software 5. Software 5. Software 6. S	GREGOR	RY ALLEN, D.M.D., P.A.											
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416 N. TEMPLE AVE. STARKE F1 32091 11. Evisuant to the provisions of Sections 807.050.1 and 607.1508, Florida Stati ites. the above-named corporation submits this statement for the purpose of changing its 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 obliga ions of, Section 607.050.5, Florida Statutes. SIGNATURE Signature, hysic or printed, and or ingritude age; load little dispricable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITIE PSTD ALLEN, GREGORY D.M.D. 13 STREET ADDRESS GIVY-ST-2P TITLE DELETE 21 TITLE 22 NAME 23 STREET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE 24 CITY-ST-2P TITLE DELETE 41 TITLE Change Addition Addition AUGUST-ST-2P TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13 STREET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE 22 NAME 33 STREET ADDRESS CITY-ST-2P TITLE DELETE 41 TITLE Change Addition Addition AUCH ST-2P TITLE Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ALLEN, GREGORY D.M.D. 13 STREET ADDRESS 23 STREET ADDRESS 24 CITY-ST-2P TITLE Change Addition ADDRESS CITY-ST-2P Change Addition Addition ADDRESS AD					82	Street A	A jdress (f	P.O. Bo∢ Number is Not	Acceptable)				
11. Pursuant to the provisions of Sactions 607.050 2 and 607.1508, Florida Stati lies, the above-named c proration submits this statement for the purpose of changing its 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 rejistered agent. I am familiar with, and accept the obligations of, Section 607.050.5 Florida Statuties. The correct Statuties of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as rejistered agent. I am familiar with, and accept the obligations of, Section 607.050.5 Florida Statuties. SIGNATURE Signature, typoid or pretade if may of registered agent agent agent agent agent to the flagorizable. (NO E Registered Agent signature relief when rematating) OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 12. TITLE STANKE FL 32091 DELETE 11 TITLE 11 TITLE 12 TITLE 13 TITLE 14 CITY ST. ZP TITLE 14 CITY ST. ZP TITLE 14 CITY ST. ZP TITLE 15 TITLE 16 Change Addition Addition ANAME 15 STARKE FL 32091 TITLE 16 Change Addition Addition ANAME 16 CITY ST. ZP TITLE 16 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO O					83								
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.C7(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 it execute this report as required by Chap er 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory

1 Fe 6 9 9 96 4 700 4
Daytime Phone #