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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P93000065302 (0)**

1. Corporation Name
JEFFREY M. HARTOG, D.M.D., M.D., P.A.

Principal Place of Business	Mailing Address
5325 GREENWOOD AVE # 202 WEST PALM BEACH FL 33407 US	5325 GREENWOOD AVE #202 WEST PALM BEACH FL 33407-2452 US

3. Date Incorporated or Qualified: 09/15/1993
3a. Date of Last Report: 02/08/1996

2. Principal Place of Business
21 4355 Bear Gully Road
Suite, Apt. #, etc.
22
City & State
23 Winter Park, FL
Zip 24 32792 Country 25 USA

2a. Mailing Address
26 4355 Bear Gully Road
Suite, Apt. #, etc.
27
City & State
28 Winter Park, FL
Zip 29 32792 Country 30 USA

4. FEI Number: 65-0442188 ☐ 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

9. Name and Address of Current Registered Agent

HARTOG, JEFFREY M
5325 GREENWOOD AVE
SUITE 202
WEST PALM BEACH FL 33407

10. Name and Address of New Registered Agent

81 Name: Hartog, Jeffrey M
82 Street Address (P.O. Box Number is Not Acceptable): 4355 Bear Gully Road
83
84 City: Winter Park FL 85 Zip Code: 32792

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D	☒ Change ☐ Addition
NAME	HARTOG, JEFFREY		1.2 NAME	Hartog, Jeffrey	
STREET ADDRESS	5325 GREENWOOD AVE # 202		1.3 STREET ADDRESS	4355 Bear Gully Road	
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP	Winter Park, FL 32792	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	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			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] JEFFREY HARTOG 4/20/97 (407) 678-3116
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #