

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 # P93000066421 (7)

1. Corporation Name

THE FOUNTAIN OF YOUTH INSTITUTE, INC.



Principal Place of Business

Mailing Address

34156 U.S. HIGHWAY 19 NORTH
NORTH PALM HARBOR FL 34684

34156 U.S. HIGHWAY 19 NORTH
NORTH PALM HARBOR FL 34684

3. Date Incorporated or Qualified

09/23/1993

3a. Date of Last Report

04/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3203698

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRELL, RANDALL
34156 U.S. HWY. 19 NORTH
PALM HARBOR FL 34684

81

Name

HARRELL, RANDALL

82

Street Address (P.O. Box Number is Not Acceptable)

34156 U.S. Hwy. 19 North

83

84

City

Palm Harbor

FL

85

Zip Code

34684

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, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when first filing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

☐ DELETE

NAME

HARRELL, C R

STREET ADDRESS

34156 U.S. HWY 19 N.

CITY- ST- ZIP

PALM HARBOR FL

TITLE

PS

☐ DELETE

NAME

HARRELL, MARISSA A

STREET ADDRESS

34156 U.S. HWY. 19 N

CITY- ST- ZIP

PALM HARBOR FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

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CITY- ST- ZIP

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARISSA A. HARRELL

3/1/96 (613) 781-0818

Date

Daytime Phone

CR2E034 (12/95)