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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS 1996

DOCUMENT # Corporation Name

P94000001586 (4)

CAREFIRST OF FRUITLAND PARK, INC.

Mailing Address Principal Place of Business 3235 US HIGHWAY 441/27 3235 US HIGHWAY 441/27 SUITE C FRUITLAND PARK FL 34731 FRUITLAND PARK FL 34731 3a. Date of Last Report 3. Date Incorporated or Qualified 12/29/1993 05/01/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-3218295 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite. Ant. #. etc. Fee Required 27 22 **\$5.00** May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zφ Country ¥ Yes □No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 CREWS, STEVEN A 26 CYPRESS DRIVE 83 **EUSTIS FL 32726** Zip Code 85 City 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. UAL SIGNATURE TWIFE Registered Agent squature regain Signature, typied or printed name of registered agent and the if applicable CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE 1.17(1)(8 TITLE 1.2 NAME CREWS, STEVEN A NAME L3 STREET ADDRESS 26 CYPRESS DRIVE STREET ADDRESS 14 CHY+SI-ZIP **EUSTIS F; 32726** CITY - \$1 - ZIP Change Addition DELETE 2 1 11116 THILE 2.2 NAME HUSTY, TODD M NAME 2.3 STREET ADDRESS 5690 SOUTH LAKE BURKETT LANE STREET ADDRESS 2.4 CHY - ST- Zi^D WINTER PARK FL 32792 CITY - ST - ZIP ☐ Change Addition DELETE 3 1111.6 HILE 3.2 NAME WEAVER, WILLIAM H NAME 3.3 STREET ADORESS 24 CYPRESS DRIVE STREET ADDRESS EUSTIS FL 32726 3 4 CITY - ST - ZIP CITY - ST-ZIP F7 DELETE 4 1 DILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS oprings, FL 4.4.C-1Y - ST - ZIP CHTY - ST - ZIP DEVETE 5 1 TOLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY ST-ZIF CITY-ST-Z-P ☐ Change ■ Addition DELETE 6 1 TIFLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 City - ST - 21P 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 eath; that I am an officer or director of the congration or the receiver or trusting powered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

appears in Block 12 or Block 13 if char

FILED

Secretary of State

May 01 1996 8:00 am