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FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000001586 (4)

1. Corporation Name

CAREFIRST OF FRUITLAND PARK, INC.



Principal Place of Business

Mailing Address

3235 US HIGHWAY 441/27
SUITE C
FRUITLAND PARK FL 34731
US

3235 US HIGHWAY 441/27
SUITE C
FRUITLAND PARK FL 34731
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified
12/29/1993

3a. Date of Last Report
05/01/1996

4. FEI Number

59-3218295

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

10. Name and Address of New Registered Agent

CREWS, STEVEN A
28 CYPRESS DRIVE
EUSTIS FL 32726

81 Name

Crews, Steven A

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

25225 Derby Drive

83

84 City

Sorrento

FL

85 Zip Code

32776

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CREWS, STEVEN A
STREET ADDRESS 28 CYPRESS DRIVE
CITY-ST-ZIP EUSTIS F; 32726

TITLE ☐ DELETE

NAME HUSTY, TODD M
STREET ADDRESS 5690 SOUTH LAKE BURKETT LANE
CITY-ST-ZIP WINTER PARK FL 32702

TITLE ☐ DELETE

NAME WEAVER, WILLIAM H
STREET ADDRESS 24 CYPRESS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☐ DELETE

NAME VIC HUSTY
STREET ADDRESS 1700 LITTLETON CT
CITY-ST-ZIP LOINTER SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Crews, Steven A
1.3 STREET ADDRESS 25225 Derby Drive
1.4 CITY-ST-ZIP Sorrento, FL 32776

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 or on an attachment with an address.

SIGNATURE:

[Signature]

CR2E034 (9/96)