

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 MAY -1 AM 10:30

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000008801 (0)

1. Corporation Name:
~~CNN INC.~~ **PRECISION MEDICAL TRANSCRIPTION, INC.**
(AMENDED 2-24-95)

200001478412
-05/08/95--01028--009
******200.00 ****200.00**

Principal Place of Business
**1103 FLORIDA AVENUE
PALM HARBOR FL 34683**

Mailing Address
**1103 FLORIDA AVENUE
PALM HARBOR FL 34683**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/26/1994	3a. Date of Last Report N/A
4. FEI Number	☒ 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	

2. Principal Place of Business 3922 FIELDSTONE COURT Suite, Apt. #, etc. #108 City, State PALM HARBOR, FL Zip 34684	2a. Mailing Address 1103 FLORIDA AVENUE Suite, Apt. #, etc. 40 CPC City & State PALM HARBOR, FL Zip 34683
24. USA	25. USA
26. 34684	27. 34683
28. USA	29. USA

9. Name and Address of Current Registered Agent RUSSELL, GARY K 1103 FLORIDA AVENUE PALM HARBOR FL 34683	10. Name and Address of New Registered Agent 81. Name THOMAS A. WEEDEN 82. Street Address (P.O. Box Number is Not Acceptable) SUITE 108 83. 3922 FIELDSTONE COURT 84. City, State, Zip PALM HARBOR FL 34684
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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: *Thomas A. Weeden* **THOMAS A. WEEDEN, V.P.** **4-28-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE D	NAME RUSSELL, GARY K STREET ADDRESS 1103 FLORIDA AVENUE CITY, ST, ZIP PALM HARBOR FL 34683	1.1 TITLE ☒ Change ☐ Addition	P. D
2. TITLE	NAME KELLY J. WEEDEN STREET ADDRESS 3922 FIELDSTONE COURT SUITE 108 CITY, ST, ZIP PALM HARBOR, FL 34684	1.2 NAME	KELLY J. WEEDEN
3. TITLE	NAME THOMAS A. WEEDEN STREET ADDRESS 3922 FIELDSTONE COURT SUITE 108 CITY, ST, ZIP PALM HARBOR, FL 34684	1.3 STREET ADDRESS	3922 FIELDSTONE COURT SUITE 108
4. TITLE	NAME	1.4 CITY, ST, ZIP	PALM HARBOR, FL 34684
5. TITLE	NAME	2.1 TITLE	☐ Change ☒ Addition
6. TITLE	NAME	2.2 NAME	THOMAS A. WEEDEN
7. TITLE	NAME	2.3 STREET ADDRESS	3922 FIELDSTONE COURT SUITE 108
8. TITLE	NAME	2.4 CITY, ST, ZIP	PALM HARBOR, FL 34684
9. TITLE	NAME	3.1 TITLE	☐ Change ☐ Addition
10. TITLE	NAME	3.2 NAME	
11. TITLE	NAME	3.3 STREET ADDRESS	
12. TITLE	NAME	3.4 CITY, ST, ZIP	
13. TITLE	NAME	4.1 TITLE	☐ Change ☐ Addition
14. TITLE	NAME	4.2 NAME	
15. TITLE	NAME	4.3 STREET ADDRESS	
16. TITLE	NAME	4.4 CITY, ST, ZIP	
17. TITLE	NAME	5.1 TITLE	☐ Change ☐ Addition
18. TITLE	NAME	5.2 NAME	
19. TITLE	NAME	5.3 STREET ADDRESS	
20. TITLE	NAME	5.4 CITY, ST, ZIP	
21. TITLE	NAME	6.1 TITLE	☐ Change ☐ Addition
22. TITLE	NAME	6.2 NAME	
23. TITLE	NAME	6.3 STREET ADDRESS	
24. TITLE	NAME	6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 139.07(4)(b), 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 on the receipt of this report or further 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: *Kelly J. Weeden* **4-28-95** **813-789-9662**
KELLY J. WEEDEN, President/Director