FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

5 CLIFFORD DR.

SHALIMAR FL 32579

SUITE 12



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000028438 (7)

WILLIAM E. PRESTON, JR., D.D.S., P.A.

| Principal Place of Business | | Mailing Address | | I TOOLIOOL TID TELL DIGHT BEST BEST BEST BOST STORY SOLD STORY CHOOL STORY STORY SOLD STORY | | |
|------------------------------|-----------------------------|---|--|---|---|--|
| 20 N.W. RACE FT. WALTON E | track RD. Beach FL 32547 | 20 N.W. RACETRACK RD. FT. WALTON BEACH FL 32547-1642 | | | | |
| | | | | 3. Date Incorporated or Qualified 04/14/1994 | 3e. Date of Last Report 02/19/1996 | |
| 2. Principal F | hace of Business | 2a. Mailing Add | iress | 4. FEI Number | Applied For | |
| 21 | | 26 | | 59-3243929 | Not Applica | |
| Suite, Apt. #, etc. | | Surte, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Z _(F) | Country 25 | Z p 29 | Country 30 | 8. This corporation has liability for Florida Statutes | rintangible tax under s. 199.032, □ Yes □ No | |
| | 9. Name and Address of C | urrent Registered Agent | 10. Name and Address of New Registered Agent | | | |
| PERRI, DANIEL C | | | | 9 | | |

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. Lam familiar with and accept the obligations of, Section 607,0505, Florida Statutes.

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

| | Signature, typed or printed name of registered agent and the if | | E. Registered Agent signature requi | | |
|-----------------|---|----------|-------------------------------------|---|-------------------|
| 12. | OFFICERS AND DIREC | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO | |
| TITLE | D | DELETE | 1,1 TITLE | Change | Addition |
| NAME | PRESTON, WILLIAM E JR. | | 1,2 NAME | | |
| STREET ADDRESS | 20 N.W. RACETRACK RD. | | 1.3 STREET ADDRESS | | |
| CITY - S1 - ZIP | FT. WALTON BEACH FL 32547 | | 1,4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 2 1 TITLE | Change | Addition Addition |
| NAMÉ | | | 2.2 NAME | | |
| STREET ADDRESS | | | 23 STREET ADDRESS | | |
| CITY - ST - ZIP | | | 2 4 CITY-ST-ZIP | | |
| THUE | | ☐ DELETE | 3 1 TITLE | ☐ Change | Additio |
| NAME | | | 32 NAME | | |
| STREET ADDRESS | | | 3 3 STREET ADDRESS | | |
| CITY-SI-ZIP | | | 3.4. CITY - ST - ZIP | | |
| THLE | | DELETE | 4.1 TITLE | Change | Additio |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CHY-S1-ZIP | | | 4.4 CITY - \$1 - ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | Change | Additio |
| NAME | | | 5.2 NAME | | |
| STREET ADORESS | | | 5 3 STREET ADDRESS | | |
| CITY+ST-ZIP | | | 5.4 CHTY-ST-ZIP | | |
| 7014 | | DELETE | 6.1 TIFLE | ☐ Change | Additio |
| NAME | | | 6.2 NAME | _ | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| City-St-7tP | | | 6.4 CITY-ST-JIP | | |

14. To 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

Applied For Not Applicable

Zip Code

FILED

Jan 24 1997 8:00am

Secretary of State

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