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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

Change

Addition

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400086789 (2)

DOYEN MEDIPHARM, INC.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Principal Place 625 MCCUE RO LAKELAND FL S US	AD	Mailing Address 625 MCCUE ROAD LAKELAND FL 33815-3254 US							
						3. Date Incorporated or Qualified 11/30/1994		ale of Last Ri )1/1996	eporl
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		<del>-</del>	pplied For	
21		26			59-3280917		No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27			5. Certificate of Status Desired		<b>\$8.75</b> A Fee Re		
City & State	9	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28	<b></b> • • • • • • • • • • • • • • • • • •			Trust Fund Contribution		Added t	o Fees
Zip <b>24</b>	Country 25	7(p)	Cour 30	ntry			🕻 Yes 🏻 [	] No	199.032
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered	Agent	
BERISWILL, MARTIN				ا'°	rvame				
625 MCCUE ROAD LAKELAND FL 33801-3254			[	82	Street Add	lress (P.O. Box Number is Not Acceptal	ole)		
LAN	ELAND FL 33001-3234		-	83					
				84	City		FL	<b>85</b> Zip (	Code
agent. I a SIGNATURE	m familiar with, and accept the oblig	gations of, Section 697,0505	, Florida Stati	utes	S.	poration submits this statement for the partition's board of directors. I hereby acceptions are related when relations	DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND		
TITLE	P/D	☐ DELETE	1171	l F				☐ Change	Addition
NAME	BERISWILL, MARTIN		1.2 NA	Μŧ					
STREET ADDRESS	625 MCCUE ROAD		13 SH	HEF 1	ADDRESS				
CITY-ST-ZIP	LAKELAND FL 33801-3254	T''I '	1.4 CIT		1 - 7IP				
TITLE	T/D WARD, GREG	DELETE	2110					☐ Charige	Additron
NAME	625 MCCUE ROAD		22 NA						
STREET ADDRESS	LAKELAND FL 33801-3254		2350 240		ADDRESS				
CITY-ST-ZIP TITLE	S/D	DELETE	3 1 101		21-71°			Change	Addition
NAME	JOHNSON, RAY		3.2 NA					_ ,	
STREET ADDRESS	520 SPEEDWELL AVE.				ADDRESS				
CITY-ST-ZIP	MORRIS PLAINS NJ 07950-21	26	34 CI						
TITLE	M/C	DELETE	4.1 TIT		<del>-</del>			Change	Addition
NAME	ISAACS, ALAN		4. 2 N/	\Mf					
STREET ADDRESS	CAVENDISH HOUSE CAMBRID		4.3 ST	KELT	ADDRESS				
CITY-ST-ZIP	BARTON, CAMBRIDGE ENGL		4.4.CI	IY-S	01 - ZIP				
TITLE		☐ DELETE	5.110	LE				☐ Change	Addition
NAME			5 2 NA	MΕ					
STREET ADDRESS			5.3 \$1	R££1	ADDRESS				

14. I do hereby certify that the information supplied with this filing does not quality 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 eath; 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 if changed, or on an attachment with an address.

6.4 CITY - ST - 7IP

5.4 CHTY- ST. ZIF

**6.1 THEE** 

6.2 NAME 6.3 STREET ADDRESS

DELETE