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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000092253 (1) 1. Corporation Name

JUANITA M. BROWN, D.O., P.A.

Principal Place 1417 N SEMOR SUITE 103 ORLANDO FL 3	AN BLVD	Mailing Address 1417 N SEMORAN BLVD SUITE 103 ORLANDO FL 32807-3570		3. Date Incorporated or Qualified 05/01/1996		
2. Principal P	Piace of Business	2a. Mailing Address			4. FEI Number	05/01/1996 Applied For
21		26			59-3281080	Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.			\$9.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Ζφ	Count	try	8. This corporation has liability for	gtangible tax under s. 199.032,
24	25		30		Florida Statutes	Yes No
	9. Name and Address of Curre	nl Registered Agent			10. Name and Address of New Re	gistered Agent
	WN, JUANITA M		*	1 Name		
	' N SEMORAN BLVD		8	2 Street A	ddress (P.O. Box Number is Not Acceptab	ele)
	E 103		_			
ORL	ANDO FL 32807-3555		B	3		
			8	4 City		85 Zip Code
	40.000	60 1000 IF 00 Fi 11 0		1	corporation submits this statement for the p	FL 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
SIGNATURE	Signation Material contribution of the prepending	gent and blife tagge cable (NOTE	Registered A		oration's board of directors. I hereby acception and the second of directors. I hereby acception acception and the second of directors.	DATE
12.		ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PSD HANDEAN	ו טנונונ	1 1 TITLI			Change Addition
NAME	BROWN, JUANITA M 1301 TIERRA CIRCLE		1.2 NAM	į į		
STREET ADDRESS	WINTER PARK FL 32792			ET ADDRESS		
CITY - ST - ZIP TITLE	TD	DELETE	2.4 CITY	-ST-ZIP		Change Addition
NAME	BROWN, G. MCN.	La beere	2 2 NAM			originge Nation
STREET ADDRESS	1301 TIERRA CIRCLE					
CITY-ST-ZIP	WINTER PARK FL 32792			ET ADDRESS		
TITLE	WHITEIT FAIRT I C OLFOR	DELETE	3.1 TITLE	Y-ST-ZIP		Change Addition
NAME			3.2 NAM			C on the control of t
STREET ADDRESS				ET ADDRESS		
CITY - ST - 7IP				-SI-ZIP		
TILE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAN			
STREET ADDRESS			1	ET ADDRESS		
CHY-SI-7P			4.4 CITY			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	ŧ l		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY ST-ZIP			5.4 CITY	- ST - Z(P		
litté .		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY - \$1 - 7IP			6.4 CITY			
14. I do herel informatic	by certify that the information supplies in indicated on this annual report or	ed with this filing does not qualify supplemental appual report is to	y for the ex	kemption sta	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega	s. I further certify that the
Lam an o appears i	ifficer or director of the corporation on Block 12 or Block 13 in hanged, o	or the receiver or trustee empower or on an allachment with an addi	ered to exi ress.	ecute this re	port as required by Chapter 607, Florida S	tatutes; and that my name

SIGNATURE:

TO TYPED OR PRINTER WAS ED STONING OFFICER OR DIRECTOR

DIVANITA M. BROWN, D.O. x 1-10-97

407-277-0231

FILED

Jan 21 1997 8:00am

Secretary of State