FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Morth

Secretary of State
DIVISION OF CORPORA

POCUMENT # P95000021968 (9)

LEE POPWELL, D.C., P.A.

Principal Place of Business Mailing Address
130 4TH AVENUE. SOUTH 130 4TH AVEN
JACKSONVILLE BEACH FL 32250 JACKSONVILLE

FILED Apr 29 1997 8:00am Secretary of State



JACKSONVILLE BEACH FL 32250		JACKSONVILLE BEACH FL 32250-8		ı			
					3. Date incorporated or Qualified 03/17/1995	3a. Date of Last 03/11/199	
2. Principal Place of Business		Mailing Address			4. FEI Number		Applied For
21		<u></u>			<u>59-3304403</u>		lot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	Additional Required
City & State		City & State			6. Election Campaign Financing		May Be
Zip	Country 28	Zip Count		,	Trust Fund Contribution		
24 25	29	3				ntangible tax under Yes \tag No	s. 199.032,
	d Address of Current Regist	ered Agent		· • - •	10. Name and Address of New Re	-	
COATES, IONA				8 Name			
6212 SYRINGA LANE JACKSONVILLE FL 32211				8 Street Address (P.O. Box Number is Not Acceptable)			
JACKSUNVILLE	FL 32211		8				
•			8	City	THE STREET OF TH	10-1	Code
				'			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abolic-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.							its registered s registered
SIGNATURE							
12.	OFFICERS AND DIRECT		13.	ent signature n	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIRECTO	RS IN 12
TITLE		DELETE	1.1 TITLE			Change	Addition
NAME POPWELL,			1.2 NAM				
	AVENUE, SOUTH		1.3 STREE	ADDRESS			;
411	VILLE BEACH FL 32250		1.4 CITY -	ST-ZIP			
TITLE D		DETELE	2.1 TITLE			☐ Change	Addition
NAME POPWELL, ELIZABETH E			2.2 NAME				
STREET ADDRESS 130 4TH AVENUE, SOUTH		2.3 STF		ADDRESS			İ
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250			2. 4 CITY-	ST - ZIP			
TITLE DELETE		3.1 TITLE	1		Change	Addition	
NAME '		3.2 NAME					
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP TITLE DELETE		3.4. CITY- 4.1 TITLE	ST-ZIP		Change	Addition	
NAME		4 2 NAME			() Change	☐ Addition	
STREET ADDRESS				I ADDRESS			
CITY-SI-2IP		4.4 CITY-1					
TITLE	DELETE		5.1 TITLE			Change	Addition
NAME		5.2 NAME					
STREET ADDRESS			ADDRESS				
CITY-ST-ZIP		5.4 CITY-	ST-ZIP				
TITLE		DELFTE	6.1 TITLE	1		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-7P 14. I do hereby certify that the information supplied with this filing does not qualify to			6.4 C(TY - S				
	e unormation supplied with this	s unna done not auplifu f	or the ove	mrshon eta	tod je Section 110 07/2\(ii\) Elected Ctatutes	I do not be seen as a 1977 of the see	

I do needly certify that the information supplied with his filling 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 oath; that I am an officer or director of the corporation or the receiver or trust-compowered to explude this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attainment with in address.