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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049885 (3)

HELENE V. SHEPARD, RN, P.A.

Principal Place of Business

PO BOX 1860
BRANDON FL 33509

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

2b. Mailing Address

4. FEI Number

59-3373396

Not Applied For

10 Not Applicable

								U0/23/ 1993				
2. Principal Place of Business			2a. Mailing Address				4.	FEI Number			Applied For	
1			26				59-3373396				Not Applicab	le
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.			\$8.75 Additional Fee Required		
City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution				
Zıp	Country 25	29	Zip Country 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
SHEPARD, RN, HELENE V 501 VALLEY HILL DR. BRANDON FL 33510					81	Name						
					82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
					83							
					84	City				85	Zip Code	_
	Suite, Apt. #, otc City & State Zip 9. Name SHEPARD, RI 501 VALLEY	Suite, Apt. #, etc City & State Zip Country 25 9. Name and Address of Cu SHEPARD, RN, HELENE V	Suite, Apt. #, etc City & State Zip Country 25 9. Name and Address of Current Regist SHEPARD, RN, HELENE V 501 VALLEY HILL DR.	Suite, Apt. #, etc Suite, Apt. #, etc City & State Zip Country 25 Quantity 29 Quantity 29 Quantity SHEPARD, RN, HELENE V 501 VALLEY HILL DR.	Suite, Apt. #, etc Suite, Apt. #, etc City & State City & State Zip Country Zip Zip Country Zip Zip Country Zip Country Zip Country Zip Country Zip Cou	Suite, Apt. #, etc Suite, Apt. #, etc. City & State City & State Zip Country 25 9. Name and Address of Current Registered Agent SHEPARD, RN, HELENE V 501 VALLEY HILL DR. BRANDON FL 33510	26 Suite, Apt. #, etc.	26	Principal Place of Business 28. Mailing Address 29. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 27. City & State 28. Certificate of Status Desired City & State City & State Country 29. Country 25. Personal Property Tax due June 9. Name and Address of Current Registered Agent SHEPARD, RN, HELENE V 501 VALLEY HILL DR. BRANDON FL 33510 4. FEI Number 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has personal Property Tax due June 9. Name and Address of Current Registered Agent SHEPARD, RN, HELENE V 501 VALLEY HILL DR. 82. Street Address (P.O. Box Number is Not Accepta	Principal Place of Business 28. Mailing Address 26. Suite, Apt. #, etc. 27. City & State City & State City & State Country 28. This corporation owes or has paid the content of the personal Property Tax due June 30. 9. Name and Address of Current Registered Agent SHEPARD, RN, HELENE V 59. Street Address (P.O. Box Number is Not Acceptable) 83. Street Address (P.O. Box Number is Not Acceptable)	Principal Place of Business 2a. Mailing Address 5b-3373396 Suite, Apt. #, etc. 5c. Certificate of Status Desired 5c.	Principal Place of Business 28. Mailing Address 26. Suite, Apt. #, etc. Suite, Apt. #, etc. 27. City & State City & State Country 28. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 9. Name and Address of Current Registered Agent SHEPARD, RN, HELENE V 501 VALLEY HILL DR. BRANDON FL 33510 Applied For Not Address 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. 81 Name Street Address of New Registered Agent Street Address (F.O. Box Number is Not Acceptable) 83

11. Pursuant to the previsions 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 Horida. 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if apply able 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Change TITLE 1.1 TITLE SHEPARD, HELENE V RN NAME 1.2 NAME 501 VALLEY HILL DR. 1.3 STREET ADDRESS STREET ADDRESS **BRANDON FL 33510** CITY-ST-ZIP 1.4 City-St-ZiP DELFTE Change ■ Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change ___ Addition TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 City - St - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 🔲 DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS**

14. 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 appears in Pleat 12 or Pleat 12 in the legal of the corporation of the corpo

SIGNATURE: '

CITY-\$1-ZIP

Helene KShemid

Helene V. Shepard

3/4/98 813

FILED

Mar 13 1998 8:00am

Secretary of State

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