## 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 # P95000055735 (1)

GEORGE T. ABERNATHY, M.D., P.A.

Principal Place of Business Mailing Address

39 RIVERVIEW ST 39 RIVERVIEW ST
FRANKLIN NC 28734 FRANKLIN NC 28734-2609

## FILED May 19 1997 8:00am Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report

					08/01/1995	04/	04/10/1996	
<del>-</del> 1 '	ace of Business	2a. Mailing Address	JIL	Orive	4. FEI Number		<u> </u>	plied For
21 Suite, Apt. #, etc.		26 16644 10	rikin	WINE	59-3337863		and the second second second	t Applicable
Suite, Apr.	#, BtC.	Suite, Apt. #, etc.	G		5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28 10MP9 BL			Trust Fund Contribution	Added to Fees		
Zip	Country	ZO	Country	Α Λ	8. This corporation has liability for	or intangible	tax under s	. 199.032,
4	25	[29] DOW/P	30 U.	o . 6-₹ .	Florida Statutes	Yes [		
	9. Name and Address of Curre	nt Registered Agent		I:	10. Name and Address of New	Registered	Agent	
	rd, robert g jr cp		81	Name				
16644 VALLEY DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 111			83					
TAM	PA FL 33618		83					
			84	City			<b>85</b> Zip	Code
				l <u></u>		FL	:   .	
office or re	egistered agent, or both, in the State	e of Florida. Such change was	authorized by	the corporation	pration submits this statement for the on's board of directors. I hereby acc	e purpose of cept the app	r changing it ointment as	s registered registered
agent∷i ai SIGNATURE	m familiar with, and accept the oblig	gations of, Section 607.0505, Fi	iorida Statule:	S.				
	Signalure, typed or pooled name of registered as			ant signature require		DANE		
12.	OFFICERS AN	NO DIRECTORS	13.		ADDITIONS/CHANGES TO OF	ICERS AND	DIRECTOR  Change	IS IN 12 Additio
	ADDOMATUV GEODGE T		11 THLE	-			[_] Criange	L_J ADOIN
NAME	ABERNATHY, GEORGE T 39 RIVERVIEW ST		12 NAME					
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NAME	BEARD, ROBERT G JR CP	DETECT		Ì			☐ Change	Additio
	16644 VALLEY DRIVE		2.2 NAME					
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NAME :			6.2 NAME				·	
STREET ADDRESS			63 STREET	ADDRESS				
CITY-ST-ZIP	W. W.		6.4 CITY - S					
	ov certify that the information supplied	ed with this filing does not gual			in Section 119.07(3)(i), Florida State	ites. I further	r certify that	the

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 example or a property or an analysis 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 example or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name