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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P95000079616

DANIEL B. BALDRIDGE, DDS, P.A.

## **FILED** Feb 15, 1999 8:00am **Secretary of State**

02-15-1999 90035 038 \*\*\*150.00



A03 GALL BLVD. ZEPHYRHILLS FL 33541  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 10/17/1995  4. FEI Number 59-3365326  Not Applied For Not Applicable Suite, Apt. #, etc.  2  City & State  City & State  Zip  Country  Zip  Zip  Country  Zip  Zip  Country  Zip  Country  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	Principal Place	of Business	Mailing Address					
EPHYRHILIS P. 35541  Ze   Date Incorporated or Qualified   DATE								
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Delet recognited or Qualified 1/1/1/1995 4. FEI Number 59-3365326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-33665326 59-3366526 59-33	ZEPHYRHILLS FL 33541		ZEPHYRHILLS FL 33541		DO NOT WRITE IN THIS SPACE			
10/17/1985   Applied for   Sp. 17/1985   Applied for   Sp. 3365326   Sp. 175 Additional   Splits, Appl. #, etc.   Suite, Appl. #, etc.   Sp. 27 Additional   Splits, Appl. #, etc.   Sp. 275 Additional   Splits, Appl. #, etc.   Sp. 275 Additional   Splits, Appl. #, etc.   Sp. 275 Additional   Sp. 275 A		•					_	
2. Principal Place of Business   2a Mailing Address   4. FEI Number   Applied For   Not Applicable   Status   Pesinger   Applied For   Pero Required For   Applied For   Not Applied For   Not Applied For   Applied F								ļ
2, Mailing Address   2, Mailing Address   59-3365326   Not Applicable   120   20   20   20   20   20   20   2							Appli	ed For
Suite, Apt. #, etc.	2 Principal Pla	ace of Business	2a. Mailing Address					
Suite, Apt. #, etc.   2   2   2   2   2   2   2   2   2	<del>-</del> 1		26		59-3305320			
City & State	21 Suite Ant #	‡ etc.			5 Certificate of Status Desired			
City & State    City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & Country   Zip		-	27					
28   Zip Country   Zip   Country   Zip   Country   Zip   Country   S. This corporation owes the current year intangible   Personal Property Tax.   Yes   Zip   Zip	City & State							
20   20   20   30   30   30   30   30		•	28					rees
All Est Statement Address of Current Registered Agent	23	Country		Cou	ntry	8. This corporation owes the current year in	tangible	/
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered officer or registered agent agent, and accept the obligations of Section Statutes.  SIGNATURE  SIGNATURE  11. Pursuant to the provision of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered officer or registered agent agent, and accept the obligations of Sections Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY ST.2P  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND			- <del> </del>	o		Personal Property Tax.		ZINO
BALDRIDGE, DANIEL B DDS 7403 GALL BLVD. ZEPHYRHILLS FL 33541  82 Sireet Address (P.O. Box Number is Not Acceptable)  83 FL Bs Zip Code  FL Bs	24	25	4.7	<u>-</u>		10. Name and Address of New Registered	Agent	
T403 GALL BLVD.  ZEPHYRHILLS FL 33541  B3  City FL  B5 City B1		9. Name and Address of Current	Registerou Agent		81 Name	<del></del>		1
T403 GALL BLVD.  ZEPHYRHILLS FL 33541  B3  City FL  B5 City B1	DALC	DOINGE DANIEL RIDDS				(D. D. Alimbertia Net Appendable)		
SEPHYRHILLS FL 33541					82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
### City ### FL   85   Zip Code    11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and familiar with, and accept the obligations of your formation of your footness of the configuration of your footness of yo							33.44.14.1	14444
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was submits this statement for the purpose of changing its registered agent are statement for the purpose of changing its registered when such that the purpose of changing its registered defends on the purpose of changing its registered defends agent, and the purpose of changing its registered defends agent and state its parature was registered defends. It is a such a such a such as a such a such as a such	ZEPH	HYRHILLS FL 33541			63	2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		18.5 218 1679
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, an familiar with, and accept the obligations of, Section 807,0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, hyperd or primeric name of registered agent and tits ill replectation.  NOTE: Corp. Cor					84 City		85 Zip Ci	ode
STORATURE   Signature, typed or oriented name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DAYE					1 1 7	<u></u>	_ \	agistared
STORATURE   Signature, typed or oriented name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DAYE	44 Durationt	to the provisions of Sections 607,0502	2 and 607.1508, Florida Statutes	s, the a	bove-named corp	poration submits this statement for the purpose of	intment as reg	istered
SIGNATURE   Signature, typed or plritted name of registered agent and tate it applicable.   (NOTE: Registered Agent signature required when remutating)   DATE	office or r	egistered agent, or both, in the State	of Florida, Such change was aut	thorized da Stat	by the corporate	on's board of directors. Thereby assure the	-	ţ
Signature, typed or printed name of registered appear and title if applicable. (NOTE: Registered Agent signature required when internatively in refused with signature required when internatively internative in the part of the first part of the fi	agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0303, Florid	uu Ota		•		
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   17   17   17   17   17   17   17   1	SIGNATURE		A d title if conficientle (NOTE: F	Registere	Agent signature require	ad when reinstauriu).		
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14. I 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: