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

FILEU									
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DOCUMENT # P9600000164 (9) KIDS AND NURSES OF ORLANDO, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business 672 N ORANGE AVENUE ORLANDO FL 32803 US		Mailing Address 2001 CHARLOTTE DRIVI SUITE 100A NASHVILLE TN 37203-2	2001 CHARLOTTE DRIVE SUITE 100A					
03		US	····		3. Date Incorporated or Qualified 12/29/1995	3a. Date of La		
2. Principal 21	Place of Business	2a. Mailing Address			4. FLI Number 62-1628092	01,20,100	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional e Required	
City & State		City & State		2.24	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Z _I p 24	Country 25	7(p)	Counti	ry	8. This corporation has liability for i			
	9. Name and Address of Curre				10. Name and Address of New Re			
	PROPATION SERVICE COMPAN	(Y	8	1 Name				
1201 HAYS STREET Tallahassee FL 32301-2525		8:		ddress (P.O. Box pyrhyr i nyn Argentad al 1 2 4 1 1 7 1 3				
			8:	3	****495		#165.00	
			6	4 City			Zip Code	
12. TITLE	Signature, typed or printed name of registered a OFFICERS A	NO DIRECTORS	13.		used when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC		
NAME	CRAIGHEAD, PHYLLIS	-	1.1 HILE 1.2 NAME			L Gia	rgeAddiction	
STREET ADDRESS CITY-\$T-ZIP	2001 CHARLOTTE PIKE SUIT NASHNVILLE TN	TE 100A	1.3 STREI 1.4 CHY	FT ADDRESS				
THILE	V	DELFTE	2 1 1IILE			Cha	nge Addition	
NAME	HOWELL, ROBERT J		2.2 NAME					
STREET ADDRESS		TE 100A		ET ADDRESS				
CITY-ST-ZIP	NASHVILLE TN	DELETE	2 4 CITY 3 1 TITLE			☐ Cha	nge Addition	
NAME .	BOYCE, NANCY L	_ on a	3.2 NAME	1		Ona	igo [] Addition	
STREET ADDRESS		TE 100A		ET ADDRESS				
CITY-ST-ZIP	NASHVILLE TN		3.4 CITY	- ST- ZIP				
TITLE	0	DILETE	4.1 TITLE			Cha	nge 🔲 Addition	
NAME	MILLER, ANDREW		4. 2 NAM	- 1				
STREET ADDRESS	2001 CHARLOTTE PIKE SUIT NASHVILLE TN	E 100A		E1 ADDRESS				
CITY-S1-2IP TITLE	INOUAITE IN	DELETE	4.4 CHY - 5.1 TOLE			Cha	nge Addition	
NAME		been	5.2 NAME				ישיי ביי ישי	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			5.4 CITY -	i		^		
TITLE		DELETE	61 THEF		1	∱ }\ □ Chai	nge 🔲 Addition	
NAME			6.2 NAME		$\mathcal{M}_{\mathcal{A}}$	KA .		
STREET ADDRESS			63 STREI	ET ADDRESS	K	'		
CITY - ST - ZIP			6.4 CITY-	- \$1 - 2IP	9			

14. I do 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 150 changed, or on an attachment with an address.

SIGNATURE: