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 # **P96000002597 (8)**

BAY HILL SAND LAKE MEDICAL ASSOCIATES, P.A.

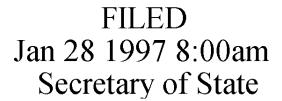
Principal Place of Business

SIGNATURE:

Mailing Address

6148 BLUE DUCK LANE, SUITE 41 ORLANDO FL 32809

8148 BLUE DUCK LANE, SUITE 41 ORLANDO FL 32809-5837





<u> </u>				3. Date Incorporated or Qualified 3a. Date of 01/09/1996	Last Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	BLUE DUCK LANE	26 75/2 DR.P	HILLIPS BLVD	. 59-3354185	Not Applicable
	E # 41	Suite, Apt. #, etc. 27 SUITE # 5	0-211		3.75 Additional Fee Required
City & State 23 OR LA	INDO FLORIDA	City & State 28 ORLANDO	, FLORIDA	Election Campaign Financing Trust Fund Contribution	5.00 May Be Added to Fees
⊒ 32%	09 Country	Zip 32819	Country ORANGE	8. This corporation has liability for intangible tax u	
24 328	9. Name and Address of Current	14-01	30 DRANGE	Florida Statutes Yes No	
7 IC	**************************************		81 Name	10. Name and Address of New Registered Agen	<u> </u>
	LAW FIRM OF LAWRENCE J SPIE	GEL CHRID		ERIC HARDOON	
	almeria avenue Al gables fl 33134		Street Address (P.O. Box Number is Not Acceptable) 10 13 4 BRANDON CIRCLE		
			83		
			1 1	ORLANDO FL 85	32836
11. Pursuant to	to the provisions of Sections 607 0502 a	and 607.1508, Florida Statute	es, the above-named co	orporation submits this statement for the purpose of char ation's board of directors. I hereby accept the appointm	iging its registered
agent Lar	n familiar with and accept the obligation	ons of, Section 607,0585. Flo	rida Statutes.	alion's board of directors, thereby accept the appointm	ient as registered
SIGNATURE	great fort			1/8/97	
	Signature, to or printed procedingsloved agent.		: Registered Agent signature red	,	4-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRI	
TITLE	PSTD	☐ DELETE	1.1 TITLE) (0	Change 🔲 Addition
NAME	HARDOON, ABRAHAM		1.2 NAME	6149 BLUE DUCK LANE, SU	17c# 41
STREET ADDRESS	6148 BLUE DUCK LANE, SUITE	41	1.3 STREET ADDRESS	6149 BLUE BUCK CHIES, SO	rich r
CITY-ST-7iP	ORLANDO FL 32809	·	1.4 CITY - ST - ZIP		
TILLE		DELETE	2.1 TITLE		Change [_] Addition
NAME			2.2 NAME		,
STREET ADDRESS			2.3 STREET ADDRESS		
CHY-S1-ZP			2 4 CITY-ST-ZIP		
TILE		DELETE	3.1 TITLE		change 🔲 Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS	President Contraction of the Con	
017Y - ST - 74P			3.4. CITY - ST - ZIP		
TITLE	***************************************	DELETE	4.1 TITLE		hange Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZiP			4.4 CITY-ST-ZIP		
TIFLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	 -	<u> </u>
STHEET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-7:P			5 4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Пл	Change
NAME			6.2 NAME		
STREET ADDRESS					
CITY+SI+ZIP			6 3 STREET ADDRESS		
	by certify that the information supplied s	with this filing does not qualif	64 CITY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statutes. I further certi	ify that the
information	n indicated on this annual report or sup	oplemental annual report is tr	ue and accurate and th	at my signature shall have the same legal effect as if ma ort as required by Chapter 607, Florida Statutes; and th	ade under oath: tha