

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

FILED
Apr 30 1997 8:00am
Secretary of State

DOCUMENT # P96000055488 (6)

1. Corporation Name
HEALTH MIST, INC.

Principal Place of Business
3319 LAURELWOOD COURT
TARPON SPRINGS FL 34689

Mailing Address
3319 LAURELWOOD COURT
TARPON SPRINGS FL 34689-9205



2. Principal Place of Business

21 5811 MEMORIAL HWY

22 SUITE 202

23 TAMPA FL

24 33615-5000 25 USA

2a. Mailing Address

26 5811 MEMORIAL HWY.

27 SUITE 202

28 TAMPA FL

29 33615-5000 30 USA

3. Date Incorporated or Qualified
06/27/1996

3a. Date of Last Report

4. FEI Number

59-3381682

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

WALKER, JILL R
3319 LAURELWOOD COURT
TARPON SPRINGS FL 34689

10. Name and Address of New Registered Agent

81 Name CHARLES E DOUGHERTY
82 Street Address (P.O. Box Number is Not Acceptable)
5811 MEMORIAL HWY SUITE 202
83
84 City TAMPA FL 85 Zip Code 33615-5000

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 office or 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. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE CHARLES E. DOUGHERTY

(NOTE: Registered Agent's signature required when resigning.)

DATE

4/15/97

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME WALKER, JILL R
STREET ADDRESS 3319 LAURELWOOD COURT
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE
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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSTD
1.2 NAME CHARLES E DOUGHERTY
1.3 STREET ADDRESS 5811 MEMORIAL HWY
1.4 CITY-ST-ZIP TAMPA, FL 33615-5000

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 13 or changed on my attachment with an address.

SIGNATURE

4/15/97 1601884-0780

CR2E034 (9/96)