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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 25 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

CITY-ST-ZIP

Block 12 or Block 13 if changed, or by an attachment

P96000065521 (2)

THERAPEUTIC SYSTEMS OF BREVARD, INC.

Principal Place of Business Mailing Address 3140 APPALOOSA BLVD 3140 APPALOOSA BLVD MELBOURNE FL 32934 MELBOURNE FL 32934 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 59:3410564 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Žφ Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HADLOCK, JERRY L 3140 APPALOOSA BLVD Street Address (P.O. Box Number is Not Acceptable) **MELBOURNE FL 32934** 83 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 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 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, type if or posted name of register assigned and the diappts able OFFICERS AND DIRECTORS 12, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME HADLOCK, JERRY L 1.2 NAME 3140 APPALOOSA BLVD STREET ADDRESS 13 STHEET ADDRESS MELBOURNE FL 32934 CITY-ST-ZIP 14 CITY - ST - ZIP DELETE Change Addition TITLE 21 1RLE NAME HADLOCK, MARSHA L 2.2 NAME STREET ADDRESS 3140 APPALOOSA BLVD 23 STREET ADDRESS MELBOURNE FL 32934 2 4 CITY-ST-ZIP CITY-ST-ZIP DELFTE ☐ Change ■ Addition 3 1 101LE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CiTY-ST-ZIP CITY-ST-ZIP DELL'IE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

64 Crty - ST - ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this annual report or suppliemental 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 employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapted, or but an attaching to the receiver or trustee employeed.

1/10/00