
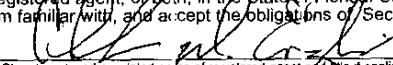


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90032 042 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000005714			
1. Corporation Name DR. CHARLES W. ENGLISH, PH.D., AND ASSOCIATES, P.A.			
Principal Place of Business 1850 LEE RD CENTER BLDG SUITE 204 309 WINTER PARK FL 32789		Mailing Address 1850 LEE RD CENTER BLDG SUITE 204 309 WINTER PARK FL 32789	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
9. Name and Address of Current Registered Agent ENGLISH, CHARLES W PH.D. 1850 LEE RD CENTER BLDG SUITE 204 309 WINTER PARK FL 32789		10. Name and Address of New Registered Agent 81 Name Charles W. English, Ph.D. 82 Street Address (P.O. Box Number is Not Acceptable) 1850 Lee Road, Ste 309 83 84 City Winter Park, FL FL 85 Zip Code 32789	
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  Signature, typed or printed name of registered agent and firm, if applicable. (NOT E: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE D NAME ENGLISH, CHARLES W PH.D. STREET ADDRESS 1850 LEE WORLD CENTER SUITE 204 309 CITY-ST-ZIP WINTER PARK FL 32789 TITLE V NAME ENGLISH, PATRY R STREET ADDRESS 1790 MARKHAM GLEN CIRCLE CITY-ST-ZIP LONGWOOD FL 32779 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 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	

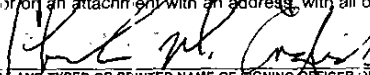
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

 Charles W. English 4/22/99 (407) 740-7899

CR2E034 (11/98)