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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9700008161 (6)

FILED Jan 28 1998 8:00am Secretary of State

1. Corporation FRANK	CLIN ASSOCIATES, INC.	(•)			
•	ce of Business	Mailing Address			00101 13101 11019 01131 1101 1501
901 MARTIN DOWNS BLVD. 901 MARTIN DOWNS BLVD. Suite 212 Suite 212			VD.		
PALM CITY FL 34990 PALM CITY FL 34990				DO NOT WRITE IN THIS SPACE	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				3. Date Incorporated or Qualified 01/28/1997	
2. Principal F	Place of Business	2a. Mailing Address		4. FEi Number	Applied For
21		26		65-0725257	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Cu	rrent Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
G/	ARDNER, FRANK W	Inclusional Chain	B1 Name	10. Hame and Address of flow Hegister	
901 MARTIN DOWNS BLVD.			20 0000	(0.0.15)	
SUITE 212			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	ILM CITY FL 34990		83		
			94 03		les I 7in Codo
			84 City	F	
office or agent. I a	to the provisions of Sections 607. registered agent, or both, in the Seam familiar wife, and accept the signature, typed or printed nago of registring	4 m	es, the above-named co authorized by the corpor orida Statutes. E: Registered Agent signalure reg	rporation submits this statement for the purpositation's board of directors. I hereby accept the accept the accept the accept when reinstating)	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	President	☐ DELETE	1.1 TITLE		Change Addition
NAME	1 2	taar	1.2 NAME		
STREET ADDRESS	Frank W. Gard	195 St 2/2	1.3 STREET ADDRESS		j
CITY-ST-ZIP	Palm like R	34990	1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		□ vecent	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-St-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	andifu that the information cumplic	d with this bling door not qualify to	or the everentian stated i	n Section 119 07(3)(i) Florida Statutes, Lifurther	portify that the information

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 eath, 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 addition.

HOMATHOE & Man W Harl

1/21/90