## 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

DOCUMENT # P97000029978 (8)

WANDA COOK BATSON O.D., P.A.

Principal Place of Business

Mailing Address

207 N MAIN STREET CRESTVIEW FL 32536

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## **FILED** Feb 19 1998 8:00am Secretary of State



THE TENTE OF THE T						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 03/31/1997		
2. Principal Place	of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For	
21		26				59-342-7070	Not Applicable	
Suite, Apt. #, etc	C.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22		27				C. Certificate of Status Desired	Fee Required	
City & State		City & State				6. Election Campaign Financing	<b>\$5.00</b> May Be	
23	1 0	28	7:a Country			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country		8. This corporation owes or has paid the cu		
24	25 Name and Address of Curre	29	30			Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No	
BATSON, WANDA C					81 Name			
8102 ROCK HILL RD				<u> </u>				
BAKER FL 32531				82 Street Addre		ss (P.O. Box Number is Not Acceptable)		
DARLIT	1 6 05001		63					
			Ī	B4 (	City	FI	85 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent					signature required	when reinstating) DATE		
12.			13.	<u></u>		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE		☐ DELETE	1.1 TJTL	.E	D	75/7	☐ Change ☐ Addition	
NAME			1.2 NAA	Æ	, A	anda Cook Batson	Camada	
STREET ADDRESS	RESS		1.3 STR	1.3 STREET ADDRESS		120 Rock Hill Road	Same as last year but	
CITY-ST-ZIP			1.4 CITY	/-ST-2		restore Baker FL 32531	not in black 12	
TITLE		☐ DELET <b>E</b>	2.1 TITL	E			Change Addition	
NAME	2.		2.2 NAM	2.2 NAME				
STREET ADDRESS			2.3 STR	2.3 STREET ADDRESS		<b>9</b> 7 - 5-8		
CITY-ST-ZIP			2. 4 CIT		ZIP			
TITLE	<b>_</b>		3.1 TITL	£		Change Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STR	3.3 STREET ADDRESS			İ	
CITY-ST-ZIP	Percent			3.4. CITY-ST-ZIP				
TITLE	☐ DELETE			4.1 TITLE			Change Addition	
NAME	·			4. 2 NAME				
STREET ADDRESS				4.3 STREET ADDRESS				
CITY-ST-ZIP				4.4 CITY - ST - ZIP			C Observe / D Addition	
TITLE	<b></b>		5.1 TITLI			Change Addition		
NAME	1		5.2 NAM			$M \sim 1$		
STREET ADDRESS	<b>■</b> ***		5.3 STRE			Y/) J/ ) <b>9</b>		
CITY-ST-ZIP			5.4 CITY				Change Addition	
TITLE	1		1	6.1 TITLE		5000024354 -02/19/98010600	Change	
NAME				6.2 NAME		-02/19/98010600	16 l	
STREET ADDRESS			6.3 STREET ADDRESS			***150.00		
CITY-ST-ZIP		<u> </u>	6.4 CITY	- ST - Z	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.