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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000029978

1. Corporation Name

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

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90270 044 ***150.00



من ـ						
Principal Place	of Business	Mailing Address)	
207 N MAIN STREET CRESTVIEW FL 32536 207 N MAIN STREET CRESTVIEW FL 32536 CRESTVIEW FL 32536				DO NOT WRITE IN T	HIS SPACE	
•				3. Date Incorporated or Qualifed		
-	` .			03/31/1997	u u	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
			59-3427070	Not Applicable		
21 25 Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional	
22			5. Certifcate of Status Desired	Fee Required		
-City & State City & State			6. Election Campaign Financing	\$5.00 May Be		
28		,	Trust Fund Contribution	Added to Fees		
Zip			Country	8. This corporation owes the current year		
24	25	29 30		Personal Property Tax.	Yes XNo	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ed Agent /	
5.17	2011 14(41)24 0		81 Name			
BATSON, WANDA C			82 Street Addr	2 Street Address (P.O. Box Number is Not Acceptable)		
8102 BOCK HILL RD			812	20 Rock Hill Koc	zd	
BAKI	ER FL 32531	•	83		- \	
	•	- ~	84 City		85 Zip Code	
					- L.	
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 age		stered Agent signature required 13.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	(
12.	PST OFFICERS AN	10 01110010110	1,1 TITLE	1135/110/10/	☐ Change ☐ Addition	
TITLE	COOK BATSON, WANDA	_ :	1.2 NAME		_ , _ ;	
NAME	8120 ROCKHILL ROAD					
STREET ADORESS	BAKER FL 32531		1.3 STREET ADDRESS			
CITY-ST-ZIP	DANER PE 32331		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
TITLE		_	22 NAME			
NAME			2.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		□ sciete	2.4 CITY-ST-ZIP		Change Addition:	
I MLE			3.2 NAME	- -		
NAME OTDEET ADODESS			3.3 STREET ADDRESS			
STREET ADORESS			3.4. CITY-ST-ZIP			
CITY-ST-ZIP			4.1 TITLE		☐ Change ☐ Addition	
NAME		_	4. 2 NAME			
STREET ADDRESS		-	4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE			5.1 TITLE		Change Addition	
NAME		_	5.2 NAME			
1		l	5.3 STREET ADDRESS		}	
STREET ADDRESS	,		5.4 CITY-ST-ZIP			
CITY-ST-ZIP			6.1 TITLE		☐ Change ☐ Addition	
NAME		_	6.2 NAME			
			6.3 STREET ADDRESS			
STREET ADDRESS			CACIDA ST. 71D			

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: