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FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000031844 (8)

1. Corporation Name
PHYWELL, INC.



Principal Place of Business
1018 SHPIWATCH DRIVE EAST
JACKSONVILLE FL 32225

Mailing Address
1018 SHPIWATCH DRIVE EAST
JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1997

4. FEI Number

59-3456792

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 10151 DEERWOOD PARK BLVD.

Suite, Apt. #, etc.

22 BLDG 200, SUITE 250

City & State

23 JACKSONVILLE, FL

Zip

Country

24 32256

25 USA

2a. Mailing Address

26 10151 DEERWOOD PARK BLVD.

Suite, Apt. #, etc.

27 BLDG 200, SUITE 250

City & State

28 JACKSONVILLE, FL

Zip

Country

29 32256

30 USA

9. Name and Address of Current Registered Agent

FEY, TAMARA T
1018 SHPIWATCH DRIVE EAST
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name

CHRISTOPHER T. FEY

82 Street Address (P.O. Box Number is Not Acceptable)

10151 DEERWOOD PARK BLVD, BLDG 200,

83 SUITE 250

84 City

JACKSONVILLE

FL

85 Zip Code

32256

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

4-20-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D FEY, TAMARA T ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
1018 SHPIWATCH DRIVE EAST
JACKSONVILLE FL 32225

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P CHRISTOPHER T. FEY ☐ Change ☒ Addition

1.2 NAME
1018 SHPIWATCH DR, EAST

1.3 STREET ADDRESS
JACKSONVILLE, FL 32225

1.4 CITY-ST-ZIP

2.1 TITLE V/T/S ☐ Change ☒ Addition

2.2 NAME
LYRA G. HOWART

2.3 STREET ADDRESS
9751 BRIGHTWOOD ROAD

2.4 CITY-ST-ZIP
JACKSONVILLE, FL 32257

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE:

CHRISTOPHER FEY, CEO 4/20/98

(904) 996-3077

CR2E034 (10/97)