

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Aug 10, 2007 8:00 am**  
**Secretary of State**

08-10-2007 90048 049 \*\*\*150.00

60054552



08072007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P97000070766</b>					
1. Entity Name LAKELAND FOOT & ANKLE CENTER, P.A.					
Principal Place of Business 1543 LAKELAND HILLS BLVD. LAKELAND, FL 33805			Mailing Address 1543 LAKELAND HILLS BLVD. LAKELAND, FL 33805		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc. <b>Suite B</b>			Suite, Apt. #, etc. <b>Suite B</b>		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-3461350</b>	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  COOK, GREGORY G 1543 LAKELAND HILLS BLVD. LAKELAND, FL 33805			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Gregory G Cook, D.P.M.</u> DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST COOK, KENNETH J 6954 SWEETBRIAR LANE LAKELAND, FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOK, GREGORY G 6954 SWEETBRIAR LANE LAKELAND, FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cook, D.P.M., Gregory G. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1024 Josephine Street Lakeland, Florida 33815-4425		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Gregory G Cook, D.P.M.</u> 8/07/2007 (863) 682 3395 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



ATTACHMENT # 60054552  
EP 77000070766  
**Lakeland Foot & Ankle Center, P.A.**  
Podiatry & Foot Surgery  
**Gregory G. Cook, D.P.M.**

August 7, 2007

Florida Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: Waiving of \$400.00 Late Fee

To Whom It May Concern:

Please be advised that I incorrectly filed my state corporation renewal and incorrectly applied for a new corporation rather than filing my annual report. This led to several correspondences prior to obtaining the proper established document number and submission of my annual \$150.00 fee for the annual report.

Please consider waiver of the \$400.00 late fee as a result of the misunderstanding and miscommunication. I spoke with Ms. Valerie Herring on the telephone today.

If you have any questions, please contact me.

Sincerely,

*Gregory G. Cook, D.P.M.*

Gregory G. Cook, D.P.M.

Enc. Letter from Div. of Corp. (7/24/07).

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ATTACHMENT

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**ARTICLE I NAME**

The name of the corporation shall be: Lakeland Foot & Ankle Center, P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 1543 Lakeland Hills Boulevard, Suite B  
Lakeland, Florida 33805-3246

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Medical, surgical treatment of foot  
and ankle diseases.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s): Gregory G. Cook, D.P.M., President  
Kenneth J. Cook, Secretary/Treasurer

Addresses: 1543 Lakeland Hills Boulevard, Suite B  
Lakeland, Florida 33805-3246

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Lakeland Foot & Ankle Center, P.A.  
1543 Lakeland Hills Boulevard, Suite B  
Lakeland, Florida 33805-3246

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: Kenneth J. Cook  
1543 Lakeland Hills Boulevard, Suite B  
Lakeland, Florida 33805-3246

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this  
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X Gregory G. Cook  
Signature/Registered Agent

July 3, 2007  
Date

X K. J. Cook  
Signature/Incorporator

7-3-07  
Date

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ARTICLES OF INCORPORATION  
OF

Lakeland Regional Foot & Ankle Center, P.A.  
A Professional Association

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 AUG 14 AM 8:36

The undersigned incorporator, for the purpose of forming a Professional Association under Florida's Professional Service Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE 1: NAME**

The name of the Professional Association shall be: Lakeland Regional Foot & Ankle Center, P.A.

**ARTICLE 2: PRINCIPAL PLACE OF BUSINESS**

The principal place of business of this Professional Association shall be (give street address and zip code): 1543 Lakeland Hills Boulevard, Lakeland, Florida 33805.

**ARTICLE 3: SHARES**

All stock issued by this Professional Association shall be common voting stock of a single class. The number of shares of stock that this Professional Association is authorized to have outstanding at any time is: 500.

**ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE**

The name of the initial registered agent is Dr. Gregory G. Cook, whose registered office is located at the place of business stated in Article 2 above.

**ARTICLE 5: PURPOSE AND RESTRICTIONS**

The purpose for which the Professional Association is organized is to engage in the licensed practice of podiatric medicine and foot surgery under regulation of the Florida Department of Professional Regulation. No officer, shareholder, employee, or agent shall practice any other occupation on behalf of, or in the name of, this Professional Association, except to the extent allowed by Florida law. No person rendering professional services shall become an officer, shareholder, employee, or agent of this Professional Association who does not possess a license to engage in the same occupation for which this Professional Association is organized. Should any such person lose the license to so practice, that person shall immediately sever all employment with, and financial interests in, this Professional Association.

**ARTICLE 6: NUMBER OF SHARES**

The number of shares to be issued are One Hundred (100) with a par value of One Dollar (\$1.00) per share.

**ARTICLE 7: NAME PRESIDENT, TREASURER AND SECRETARY**

The name of the President is Gregory G. Cook, D.P.M., whose home address is 222 Ash Lane, Lakeland, Florida, 33813.

The name of the Treasurer and Secretary is Kenneth J. Cook, whose

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# P97000070766

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, the undersigned Corporation organized under the laws of the State of Florida submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the corporation/professional association is:

Lakeland Regional Foot & Ankle Center, P.A.

2. The name and address of the registered agent and office is:

Gregory G. Cook, D.P.M.

Full name

1543 Lakeland Hills Boulevard

Address (P.O. Box not acceptable)

Lakeland, Florida 33805

City, State, and Zip

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 AUG 14 AM 8:36

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Gregory G. Cook, D.P.M.  
SIGNATURE OF REGISTERED AGENT

08 August, 1997

DATE

Designation of Registered Agent  
Filing Fee - \$35.00

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home address is 222 Ash Lane, Lakeland, Florida, 33813.

**ARTICLE 8: NAME AND ADDRESS OF EACH INCORPORATOR**

The name and address of each incorporator is Gregory G. Cook, D.P.M., whose home address is 222 Ash Lane, Lakeland, Florida, 33813.

**SIGNATURES:**

Gregory G. Cook, D.P.M.  
Gregory G. Cook, D.P.M.  
President

Kenneth J. Cook  
Kenneth J. Cook  
Secretary and Treasurer