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

P**RO**FIT CORP**O**RATION ANNUAL REPORT

1998

.

77

11年1日

CITY-ST-7IP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700088754 (1)

KINNEY AND MARKOU, D.O., IPA, P.A.

Principal Place of Business Mailing Address 2780 E BAY DRIVE 2780 E BAY DRIVE LARGO FL 34641 **LARGO FL 34641** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/14/1997 Applied For Principal Piace of Business 2a. Mailing Address 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. 24 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GASSMAN, ALAN S 1245 E BAY DRIVE Street Address (P.O. Box Number is Not Acceptable) LARGO FL 34641 **B3** City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME KINNEY, JAMES R 1.2 NAME 2780 E BAY DRIVE STREET ADDRESS 1.3 STREET ADDRESS LARGO FL 34641 CITY-ST-ZIP 1.4 City-St-7IP DELETE 21 TITLE Change Addition TITLE MARKOU, MICHAEL 2.2 NAME 2780 E BAY DRIVE STREET ADDRESS 2.3 STREET ADDRESS LARGO FL 34641 CITY-ST-ZIP 2. 4 CITY - \$T - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE ☐ Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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.

**Temps C. R. **LAANSEA So. D.R. H. and G.R. **ALANSEA So. D.R. H. and G.

FILED

May 05 1998 8:00am

Secretary of State