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

**CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 21 1998 8:00am Secretary of State

1, Corporation Name # P97000089661 (7) PHC-ORLANDO II, INC.					
PHOON	LANDO II, ING.				14
Principal Place	of Business	Mailing Address			FBEAL BROOK 1844 FBEAR GEAR BLOOK 1184 ABB
890 HAMMOND DRIVE		990 HAMMOND DRIVE			
SUITE 300		SUITE 300			75 017.40 004.05
ATLANTA GA 30328		ATLANTA GA 30328		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				10/17/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		58-2361047	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation owes or has personal Property Tax due Jur	
24	25 9. Name and Address of Currer		0	10. Name and Address of New F	
04				51 110	
NRAI BERVICES, INC 526 EAST PARK-AVE			99 Chank	- MANUES HON	obio)
TALLAHAGGEE FL 32314				Address (P.O. Box Number is Not Accept	Circle
THE PROOF TE GEOTT			83		
			84 City		85 Zip Code
			'()	ielando	FL     328/1/2
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above				corporation submits this statement for the	purpose of changing its registered
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its register 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 register agent. I am familiar with, and accept the obligators of Section 607.0505, Florida Statutes.					
SIGNATURE	- Staris	Ho.)			5-14-48
Signation types or preference of the perforal the dapple able (NOTE: Beg			Registered Agent signature		FICERS AND DIRECTORS IN 12
12.	Griding Ala	DELETE	1.1 TITLE	President	Change Addition
NAME	GARVIN, SARAH C			Sarah C. Garvin	
STREET ADDRESS 990 HAMMONDS DR, STE 300		10	1.3 STREET ADDRESS	990 Hammond Driv	ve Suite300
CITY-ST-ZIP	ATLANTA GA 30328	•	1.4 CITY-ST-ZIP	Atlanta GA 30325	7
TITLE		DELETE	2 1 TITLE	<b>√</b> ⊤	Change Addition
NAME			2.2 NAME	Thomas Rodners	_
STREET ADDRESS			2.3 STREFT ADDRESS	990 Hammond Dri	re, Suite300
CITY-ST-ZiP			2.4 CI1Y-ST-ZIP	Atlanta, 54 3032	<b>2</b>
TITLE		DEL ETE	3 1 TITLE	\$	☐ Change ☐ Addition
NAME			3.2 NAME	Daniel Eastein	3 10 C 1 1340
STREET ADDRESS			3.3 STREET ADDRESS		rive, suite 300
CITY-ST-ZIP		DELETE		Attanta, GA 30328	Change Addition
TITLE .		☐ DELETE	4110116		Charge Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<del></del>	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		<u> </u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-7IP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify for	the exemption state	d in Section 119.07(3)(i), Florida Statutes	I further certify that the information

indicated on this annual report or supplication tal a officer or director of the corporation of the recei-block 12 or Block 13 if changed, or on an attach annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a Ner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in