

5-4-98 B 6376C
 FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
 May 04 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 # P97000097095 (8)
 1. Corporation Name
 JOSEPH F. THOMAS, DPM, P.A.



Principal Place of Business
 602
 602 DELTONA BLVD., SUITE-B
 DELTONA FL 32725

Mailing Address
 602
 602 DELTONA BLVD., SUITE-B
 DELTONA FL 32725

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 602 DELTONA BLVD		26 602 DELTONA BLVD		11/10/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3148379	
City & State		City & State		Applied For	
23 DELTONA, FL		28 DELTONA, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 32725		29 32725		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 VOLUSIA		30 VOLUSIA		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
ROST, SCOTT R 444 SEABREEZE BLVD., SUITE 800 DAYTONA BEACH FL 32118				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent				81 Name	
				JOSEPH F. THOMAS, DPM	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				602 DELTONA BLVD.	
				83	
				84 City	
				DELTONA FL	
				85 Zip Code	
				32725	

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: *Joseph F. Thomas* DATE: 4-27-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, JOSEPH F	1.2 NAME	THOMAS, JOSEPH F.
STREET ADDRESS	410 RIDGE RD. 151 OAK GROVE CIRCLE	1.3 STREET ADDRESS	151 OAK GROVE CIRCLE ADDRESS ONLY
CITY-ST-ZIP	LAKE MARY FL 32746	1.4 CITY-ST-ZIP	LAKE MARY, FL. 32746
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, for on this attachment with an address.

SIGNATURE: *Joseph F. Thomas* DATE: 4-27-98 (402 86-1162)

CR203A (10/97)