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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$19103

(8)

WILLIAM W. PURKEY, JR., M.D., P.A.

## **FILED** Feb 11 1998 8:00am Secretary of State



| Principal Place        | o of Business   | Mailing Address   |                                 |                |                           |  |                         |                             |  |
|------------------------|---|---|---------------------------------|----------------|---------------------------|--|-------------------------|-----------------------------|--|
| 1870 ALOMA             |   | 1870 ALOMA AVE  |                                 |                |                           |  |                         |                             |  |
| STE 270                | . 54 .00-00   | STE 270   |                                 |                |                           | DO NOT WRITE IN THIS OF  | DACE.                   |                             |  |
| Winter Park<br>US      | . FL 32789  | WINTER PARK FL 32789<br>US                                  |                                 |                |                           | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  |                         |                             |  |
|                        |   | ••  |                                 |                |                           | 12/26/1990   |                         |                             |  |
| 2. Principal Pl        | ace of Business   | 2a, Mailing Address   |                                 |                |                           | 4. FEI Number  | T A                     | pplied For                  |  |
| 21                     |   | 26  |                                 |                |                           | 59-3041088   | Not Applicable          |                             |  |
| Suite, Apt. #, etc     |   | Suite, Apt. #, etc.   |                                 |                |                           | 6. Certificate of Status Desired \$8.75 Additional   |                         |                             |  |
| City & State           |   | City & Style  |                                 |                |                           |  |                         | equired                     |  |
| 23 City & State        | ,   | City & State  |                                 |                |                           | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees                           |                         |                             |  |
| Zip                    | Country   | 7 p   | Countr                          |                |                           | This corporation owes or has paid the curre  |                         |                             |  |
| 24                     | 25  | 29  | 30                              | ·              |                           | · · · · · · · · · · · · · · · · · · ·  |                         | No                          |  |
|                        | g, Name and Address of Current  | Registered Agent  |                                 |                |                           | 10. Name and Address of New Registered A   | gent                    |                             |  |
| BOYLES, WILLIAM A.     |   |   |                                 |                | 81 Name                   |  |                         |                             |  |
| 201 EAST PINE STREET   |   |   |                                 | 82             | Street Add                | ddress (P.O. Box Number is Not Acceptable)   |                         |                             |  |
|                        | TE 1200   |   |                                 |                |                           | <del></del> .  |                         |                             |  |
| ORL                    | ANDO FL 32801   |   |                                 | 83             |                           |  |                         |                             |  |
|                        |   |   |                                 | 84             | City                      |  | 85 Zip                  | Code                        |  |
| dd Discount i          | 1 000 000   | 4 CO2 4500 Flydda Chai                                      |                                 |                |                           | <u> </u>   |                         |                             |  |
| office or re           | o the provisions of sections 607 0502<br>agistered agent, or both, in the State o | rand 607 1508, ribrida Statut<br>∌Florida_Such change was a | es, the a<br>author <u>i</u> za | above<br>ad by | rnamed cor<br>the corpor∈ | rporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoint | :nanging i<br>ntment as | ts registered<br>registered |  |
|                        | m familiar with, and accept the obligat   | tions of Section 607.0505, Fi                               | orida Sta                       | atutes         | i.                        |  |                         | i                           |  |
| SIGNATURE .            | Signature, typed or protect name of regulared agen                                | Land title if upplicable (NOT                               | E Registere                     | ed Age         | nt signature requ         | uired when reinslating) DATE   |                         | l.                          |  |
| 12.                    | OFFICERS AND  | DIRECTORS   | 13.                             |                |                           | ADDITIONS/CHANGES TO OFFICERS AND I  | DIRECTOR                | RS IN 12                    |  |
| TITLE                  | PST   | ☐ DELETE  | 1 1 TITLE                       |                |                           |  | Change                  | Addition                    |  |
| NAME                   | PURKEY, WILLIAM W. JR.  |   | 1 2 NAME                        |                |                           |  |                         | l;                          |  |
| STREET ADDRESS         | • • • • • • • • • • • • • • • • • • •   |   | 1.3 STREET ADDRESS              |                |                           |  |                         | ļi                          |  |
| CITY-ST-ZIP            | WINTER PARK FL  | DELFTE  | 1.4 C(1)                        |                | r-zip                     |  | 100000                  | - Addition                  |  |
| TITLE                  | d<br>Purkey, William W. Jr.   | Detrit  |                                 |                |                           | L  | Change                  | Addition                    |  |
| NAME<br>STREET ADDRESS | 1870 ALOMA AVE STE 270  |   | 2.2 NAME                        |                | 22200004                  |  |                         |                             |  |
| CITY-ST-ZIP            | WINTER PARK FL  |   | 2 3 STREE                       |                | i i                       |  |                         |                             |  |
| TITLE                  | THE THE PARTY C   | DELETE  | DELETE 3.1 TITLE                |                | 1-212                     |  | Change                  | Addition                    |  |
| NAME                   |   |   | 3.2 NAME                        |                |                           | _  |                         |                             |  |
| STREET ADDRESS         |   |   | 335                             | STREET         | ADDRESS                   |  |                         | ľ                           |  |
| CITY-ST-ZIP            |   |   |                                 | CITY-S         |                           |  |                         |                             |  |
| TITLE                  | DELETE 4  |   | 4.1 T                           | 4.1 TITLE      |                           |  | Change                  | Addition                    |  |
| NAME                   |   |   | 4. 21                           | NAME           |                           |  |                         |                             |  |
| STREET ADDRESS         |   |   | 4.3 \$                          | STREET         | ADDRESS                   |  |                         | 1                           |  |
| CITY-ST-ZIP            | <del></del>   |   |                                 | HTY-S          | I - ZiP                   |  | <b>-</b>                |                             |  |
| TITLE                  |   | ☐ DELETE  | DELETE 5.1 TH                   |                |                           | L  | ] Change                | ☐ Addition                  |  |
| NAME                   |   |   |                                 | IAME           |                           |  |                         | Ì                           |  |
| STREET ADDRESS         |   |   |                                 |                | ADDRESS                   |  |                         |                             |  |
| CITY-ST-ZIP            | <del></del>   | DELETE  |                                 | CITY-SI        | í-ZIP                     |  | Change                  | Addition                    |  |
| TITLE<br>NAME          |   | L_1 DETELE  | 6.1 T                           |                |                           | L  | coange                  | - ADDITION                  |  |
| STREET ADDRESS         |   |   | 62 N                            |                | ADDRESS                   |  |                         |                             |  |
|                        |   |   |                                 |                | ADDRESS                   |  |                         |                             |  |
| 14. I hereby c         | erlify that the information supplied wit  | h this filing does not qualify for                          |                                 | empt           |                           | n Section 119.07(3)(i), Florida Statutes. I further cert   | fy 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 of the receive or true to the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

William W. Rekey JR 20/1AN/AR 407-645-2150