## FILE NOW: FILING FEE AFTER MAY 1 18 \$550.00

PROFIT
 CORPORATION
 ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DÓCUMENT #

The state of the s

V12155

JENNIFER S. HAYES, D.O., P.A.

Principal Place of Business

Mailing Address

(same)

**FILED** 

Apr 21 1997 8:00am

Secretary of State

813 399 9922

C70 WILLIAM JONASSEN ESQ 10785 Ulmerton Rd Largo Fl. 33778

|  | Largo Fl. 33778 |                     |                         |                     |              |   | 3.   | Date Incorporated or Qualified             | 3a. Date            | of Last R    | eport           |  |
|--|-----------------|---------------------|-------------------------|---------------------|--------------|---|--|--|---------------------|--------------|-----------------|--|
|  | _               |                     |                         |                     |              |   | [ (  | 02/03/1992                                 | 03.                 | /06/1        | 996             |  |
| 2. Principal P   | lace of Busin   | iess                | 2a. Mailio              | 2a. Mailing Address |              |   | 4.   | FEI Number                                 |                     |              | plied For       |  |
| 21   |                 |                     | 26                      | 26                  |              |   | 1 !  | 59-3109084 Not Applicable                  |                     |              |                 |  |
| Suite, Apt.  | #, etc.         |                     | Suite                   | Suite, Apt. #, etc. |              |   |  | -  |                     | \$8.75       | Additional      |  |
| 22   |                 |                     | 27                      | 27                  |              |   | 5.   | Certificate of Status Desired              | LJ                  | Fee Re       |                 |  |
| City & State   | 0               |                     | City &                  | City & State        |              |   | 6.   | Election Campaign Financing                |                     | \$5.00       | May Be          |  |
| 23   |                 |                     | 28                      | 28                  |              |   |  | Trust Fund Contribution Added to Fees      |                     |              |                 |  |
| Zip  | Zip Country     |                     |                         | Zip Cou             |              |   | 8. This corporation has liability for intangible tax under s. 19 |  |                     | 199.032,     |                 |  |
| 25   |                 |                     | 29                      | 30                  |              |   |  | Florida Stalutes Yes No                    |                     |              |                 |  |
|  | 9. Name         | and Address o       | Current Registered      | <del> </del>        |              |   | 10. Name and Address of New Registered Agent                     |  |                     |              |                 |  |
|  |                 |                     |                         |                     | 81           | Name  |  |  |                     |              |                 |  |
| JONASSEN, WILLIAM S.   |                 |                     |                         |                     |              | 82 Street Address (P.O. Box Number is Not Acceptable) |  |  |                     |              |                 |  |
|  |                 | Ulmert              |                         |                     |              |   | Once: Notice and the month of the Acceptable)                    |  |                     |              |                 |  |
|  |                 |                     |                         | •                   |              |   | 3  |  |                     |              |                 |  |
|  | Largo           | , Fl. 3             | 3778                    |                     |              |   |  |  | ·····               |              |                 |  |
|  |                 |                     | . ^                     |                     | 84           | City  |  |  | FL                  | 85 Zip (     | Code            |  |
| 11. Pursuant   | to the grovis   | in s of Some        | 7 1502 and 607 150      | 8 Florida Statute   | es the above | e-named   | cornoratio   | n submits this statement for the           |                     | hanoina it   | e registered    |  |
| office or r  | egistered ag    |                     |                         |                     |              |   | poration's t   | poard of directors. I hereby acc           | opt the appoi       | intment as   | registered      |  |
| office or registered agent, or think the Strice of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am an illustration and policy the obligations of Section 607.0505, Florida Statutes.  |                 |                     |                         |                     |              |   |  |  |                     |              |                 |  |
| SIGNATURE V  |                 |                     |                         |                     |              |   |  |  |                     |              |                 |  |
|  | Stgnature Typed | r printer name o re | ERS A ID DIRECTORS      |                     | 13.          | ent signaturo   |  | ADDITIONS/CHANGES TO OFF                   | PEDG AND I          | DIRECTOR     | C IN 10         |  |
| 12.  |                 |                     | i.na njio binebione     | DELETE              | 1111111      |   | T  | ADDITIONS/CITAINGES TO OTT                 | ICENS AND I         | Change       | Addition        |  |
| J  | D               |                     |                         | LJ breen            |              |   | }  | -  |                     | Change       | L Koomon        |  |
| NAME   | Haves           | , Jenni             | fer S.                  |                     | 1.2 NAME     |   |  |  |                     |              |                 |  |
| STREET ADDRESS   | 10333           | Semino              | le Blvd.                | 74                  |              | ADDRESS   |  |  |                     |              |                 |  |
| CITY-ST-ZIP  |                 | , F1. 3             |                         | DELETE              | 1.4 CITY - S | 31 - ZIP  | <del> </del>   |  | ·                   | Charte       | 1 4 4 4 0 0 0 0 |  |
| TITLE"   |                 | , , , , ,           | 3770                    | □ nere ie           | 21 TITLE     |   |  |  | L                   | Change       | ☐ Addition      |  |
| NAME   |                 |                     |                         |                     | 5 S NVIME    |   | ļ  |  |                     |              | 1               |  |
| STREET ADDRESS   |                 |                     |                         |                     | 2.3 STREET   | ADDRESS   |  |  |                     |              |                 |  |
| CITY-ST-ZIP  |                 |                     |                         | T DELETE            | 2.4 CITY     | \$1-7IP   | <del> </del>   |  |                     | <del></del>  | ~ <del></del>   |  |
| TITLE  |                 |                     |                         | ☐ DELETE            | 317018       |   | }  |  | L                   | Change       | Addition        |  |
| NAME   |                 |                     |                         |                     | 3.2 NAME     |   |  |  |                     |              |                 |  |
| STREET ADDRESS   |                 |                     |                         |                     | 3 3 STREET   | ADDRESS   | {  |  |                     |              | ĺ               |  |
| CITY-ST-ZIP  |                 |                     |                         |                     | 3 4. CITY -  | \$1-7IP   | ļ <u>.</u>   |  |                     |              |                 |  |
| TITLE  |                 |                     |                         | DELETE              | 4 1 111 E    |   |  |  | 1                   | Change       | ☐ Addition      |  |
| NAME   |                 |                     |                         |                     | 4 2 NAME     |   |  |  |                     |              |                 |  |
| STREET ADDRESS   |                 |                     |                         |                     | 4.3 STREET   | AUDRESS   |  |  |                     |              |                 |  |
| CITY+ST-ZIP  |                 |                     |                         | <u></u>             | 4.4 CHY - 5  | T-ZIP   |  |  |                     |              |                 |  |
| TITLE  |                 |                     |                         | ☐ DE LETE           | 5.1 TITLE    |   |  | <i>\(\lambda\)</i>                         | $\Gamma$ $\Gamma_h$ | Change       | Addition        |  |
| NAME   |                 |                     |                         |                     | 5.2 NAME     |   | J  | 1)m -1                                     | NI                  |              |                 |  |
| STREET ADDRESS   |                 |                     |                         |                     | 5.3 STREU    | ADDRESS   |  | Λ.,7                                       | 3                   |              |                 |  |
| CITY-ST-ZIP  |                 |                     |                         |                     | 5.4 CHY-5    | 51-ZIP  | ]  | - W  |                     |              |                 |  |
| TITLE  | ·               |                     |                         | DELETE              | 6 1 TITLE    |   |  | 400021!<br>-04/22/97010<br>***165.00       |                     | Change       | Addition        |  |
| NAME   |                 |                     |                         |                     | 6.5 NAME     |   |  | - <b> </b>                                 | ,                   | ii.<br>Yuus  |                 |  |
| STREET ADDRESS   | l               |                     | _                       |                     | 6.3 S1REU1   | ADDRESS   | 1  | 944 66 00 00 00 00 00 00 00 00 00 00 00 00 | յլս Աֆ              | J            |                 |  |
| CITY-SI-ZIP  |                 |                     | . 1                     |                     | 6.4 CHY-5    |   |  | ***100.UU                                  |                     |              |                 |  |
| 14. I do herel   | by certify that | it the information  | supplice Na lis film    | g does not qualif   |              |   | stated in Sc   | ection 119.07(3)(i), Florida Statu         | es. I further       | certify that | the             |  |
| 14. Loo hereby certify that the information supplied by high 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 of supplymental 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 conjugation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name |                 |                     |                         |                     |              |   |  |  |                     |              |                 |  |
| appears i  | in Block 12 c   | or Block 13 if gra  | ang (c. of or ar attach | ment with an add    | tress.       | JOIG BIID!  | - aport da It  | oquirua by oriapter oor, ritiliae          | SIGIOTOS, ATT       | a creatiny t | ian io          |  |