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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V56600

(2)

Mailing Address

GARY VAN KUEHL, M.D., P.A.

FILED
Apr 23 1997 8:00am
Secretary of State

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2151 45TH STREET Suite 206 West Palm Beach Fl 33407		SUITE 206	2151 45TH STREET SUITE 206 WEST PALM BEACH FL 33407-2009										
								<ol> <li>Date Incorporated or Qu 08/03/1992</li> </ol>	ualified	3a. Date 08/02		eport	
2. Principal P	lace of Business		2a. Mailing Addr	'0SS				4. FEI Number		#-pv-activations.ssssssss	Ap	plied For	
21			26					65-0349821			No	t Applicable	
Suite, Apt #, etc. Suite, Apt. #, etc. 27					<u></u>		5. Certificate of Status Des	alred		\$8.75 A Fee Re			
City & State	0	City & State						6. Election Campaign Fina Trust Fund Contribution	ncing		\$5.00 Added t		
Ζφ <b>24</b>	Cc <b>25</b>	untry	Zip <b>29</b>	Zip Country				8. This corporation has liability for intangible tax under s. 199.03: Florida Statutes					
<u></u>		ddress of Curre	nt Registered Agent					10. Name and Address of	New Reg	Istered Ag	ent		
JOH	INSON, LAWREN	CE D.			81	Name	3						
	S. DENNING DR				82	Stroot	et Address (P.O. Box Number is Not Acceptable)						
SUITE 4 WINTER PARK FL 32789					83	<u> </u>	, Addres	S (F.O. DOX NUMBER IS NOT P					
*****					-								
44 5		0	00 1003 4500 El-1	de Oran da	84		d		far tha a	FL		Code	
office or r	registered agent, or	both, in the Stat	02 and 607.1508, Flori e of Florida Such char gations of, Section 607	nde was au	uthorized b	y the co	a corpor rporation	ation submits this statement is board of directors. I here	tor the pu	t the appoin	itment as	registered	
SIGNATURE													
	Signature, typod or printed			(NOTE		jent signatu	re required	when reinstating)		DATE			
12.	Y	OFFICERS AN	ND DIRECTORS		13.		_	ADDITIONS/CHANGES T	O OFFICI				
TITLE	D	480	[] Di	ELETE	1 1 TITLE					L	Change	☐ Addition	
NAME	VAN KUEHL, G				1.2 NAME		1						
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CITY - \$1 - ZIP	JUPITER FARM	IS FL			14 CITY-	ST-ZIP					1 2.		
101.6			□ □	ELETE	2.1 TITLE					L	Change	Addition	
NAME					2.2 NAME								
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CITY - ST - ZIP					3.4. CITY	-ST-ZIP							
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NAME					4. 2 NAM	E							
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14. Loo 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 supplementary innual 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 receiptor trustee appears in Block 12 or Block 12 or Block 12 or Block 12 or Block 13 or Block 14 or Block 15 or Block 15 or Block 16 or Block 16 or Block 17 or Block 17 or Block 17 or Block 18 or Block 18 or Block 18 or Block 19 or Block

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/97

840-0795.