

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -9 PM 12: 00

DOCUMENT # **V60571 (9)**

1. Corporation Name
HEADACHE MANAGEMENT OF AMERICA, INC.

Principal Place of Business Mailing Address
P O BOX 53-6576 ORLANDO FL 32853-6576 **P O BOX 53-6576 ORLANDO FL 32853-6576**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/28/1992** 3a. Date of Last Report **04/29/1994**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24 25 29 30

4. FEI Number **59-3142814** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**GRIGGS, STEPHEN P
4506 LB MCLEOD ROAD, STE F
SUITE 860
ORLANDO FL 32811**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 607.0506, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY- ST- ZIP
DP KENNEDY, WILLIAM P. 4506 LB MCLEOD RD STE F ORLANDO FL
DS WALKER, WILLIAM A., II 250 PARK AVE S 6TH FL WINTER PARK FL
DVP GRIGGS, STEPHEN P. 4506 LB MCLEOD RD STE F ORLANDO FL
IRISH, REBECCA R 4506 LB MCLEOD ROAD, STE F ORLANDO FL
D WILLIAMS, LEONARD P.O. BOX 6045 N/A ORLANDO FL 32852
D WEAVER, JACK T. 3120 CORRINE DR ORLANDO FL 32803

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME **DELETE**
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE Change Addition
2.2 NAME **DELETE**
2.3 STREET ADDRESS
3.1 TITLE Change Addition
3.2 NAME **DELETE**
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on the 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, or on an attached sheet with an address.

SIGNATURE: *Rebecca R. Irish* 2/6/95 (407)841-2115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR REBECCA R. IRISH