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Jul 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N22357
1. Corporation Name
ARRHYTHMIA TECHNOLOGIES INSTITUTE

Principal Place of Business Mailing Address
255 ENTERPRISE BLVD.
SUITE 170
GREENVILLE, SC 29615

3. Date Incorporated or Qualified
9/04/87

4. FEI Number
65-0032556

Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt #, etc. 26 Suite, Apt #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name JAMES L. HOLLAND

82 Street Address (P.O. Box Number is Not Acceptable)
370 115th AVENUE

83

84 City TREASURE ISLAND FL 85 Zip Code 33706

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *James L. Holland* JAMES L. HOLLAND 7/07/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME STEVEN ERICKSON

STREET ADDRESS 7614 MANATEE AVE. W.

CITY-ST-ZIP BRADENTON, FL 34209

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D Change Addition

1.2 NAME MARK W. SWEET

1.3 STREET ADDRESS 305 NORTH ALMOND DRIVE

1.4 CITY-ST-ZIP SIMPSONVILLE, SC 29681

2.1 TITLE V/T/S/D Change Addition

2.2 NAME RICHARD C. FORNEY

2.3 STREET ADDRESS 101 NEELEY CROSSING LANE

2.4 CITY-ST-ZIP SIMPSONVILLE, SC 29680

3.1 TITLE D Change Addition

3.2 NAME SHANNON SECKINGER

3.3 STREET ADDRESS 2105 CLEVELAND STREET EXTENSION

3.4 CITY-ST-ZIP GREENVILLE, SC 29607

4.1 TITLE D Change Addition

4.2 NAME ROBERT W. HULL

4.3 STREET ADDRESS 709 SPAULDING FARM RD.

4.4 CITY-ST-ZIP GREENVILLE, SC 29615

5.1 TITLE D Change Addition

5.2 NAME JANE DERRICK

5.3 STREET ADDRESS 850 RIVER ROAD

5.4 CITY-ST-ZIP WOODRUFF, SC 29388

6.1 TITLE

6.2 NAME 000002588730

6.3 STREET ADDRESS -07/14/98--01078--031

6.4 CITY-ST-ZIP ***70.00

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard C. Forney* RICHARD C. FORNEY 7/06/98 864-455-1191
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (10/97)