2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 600671

Title:

Apr 30, 2002 8:00 AM Secretary of State

Entity Name: ORAL AND MAXILLOFACIAL SURGEONS OF MID-FLORIDA, P.A.

Current Principal Place of Business: New Principal Place of Business:

SIONAL ASSOCIATION 800 W. MORSE BLVD

800 W. MORSE SUITE #2

WINTER PARK, FL 32789 WINTER PARK, FL 32789 US

Current Mailing Address: New Mailing Address:

SIONAL ASSOCIATION 800 W. MORSE BLVD

800 W. MORSE SUITE #2
WINTER PARK, FL 32789 WINTER PARK, FL 32789 US

FEI Number: 59-1229301 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, RICHARD M
800 W.MORSE

ROBINSON, RICHARD M
800 W.MORSE BLVD.

WINTER PARK, FL 32789 US SUITE #2
WINTER PARK, FL 32789 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

in the State of Florida.

SIGNATURE: RICHARD M. ROBINSON 04/30/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD (X) Delete Title: () Change () Addition

 Name:
 LIGHTBODY, PHILIP M,
 Name:

 Address:
 800 W MORSE BLVD
 Address:

 City-St-Zip:
 WINTER PARK, FL
 City-St-Zip:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: ROBINSON, C TED, Name: ROBINSON, TED C

 Address:
 800 W MORSE BLVD
 Address:
 800 W MORSE BLVD

 City-St-Zip:
 WINTER PARK, FL
 City-St-Zip:
 WINTER PARK, FL
 32789 US

Title: SD () Delete Title: TD (X) Change () Addition

 Name:
 GARFINKEL, BOBBY
 Name:
 GARFINKEL, BOBBY C

 Address:
 800 W MORSE BLVD
 Address:
 800 W MORSE BLVD

 City-St-Zip:
 WINTER PARK, FL
 23789 US

Title: PD () Delete Title: PD (X) Change () Addition Name: BEATTIE, JEFFREY Name: BEATTIE, JEFFREY L

Name:BEATTIE, JEFFREY LAddress:800 W. MORSE BLVD.City-St-Zip:WINTER PARK, FLCity-St-Zip:WINTER PARK, FL 32789 US

Title: TD () Delete Title: SD (X) Change () Addition

 Name:
 SHARMA, PRIVEER
 Name:
 SHARMA, PRIVEER D

 Address:
 800 W MORCE BLVD
 Address:
 800 W MORSE BLVD

 City-St-Zip:
 WINTER PARK, FL
 City-St-Zip:
 WINTER PARK, FL 32789 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PRIVEER D. SHARMA SD 04/30/2002