

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2003 8:00 am
Secretary of State

03-04-2003 90065 036 ****61.25

DOCUMENT # 751310

1. Entity Name

FLORIDA SOCIETY OF THE AMERICAN COLLEGE OF GENERAL PRACTITIONERS IN OSTEOPATHIC MEDICINE AND SUR



Principal Place of Business

1930 GEORGIANA ST
11
LARGO FL 33774
US

Mailing Address

PO BOX 2025
LARGO FL 33779
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2013158**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEBSTER, KENNETH E
1930 GEORGIANA ST 11
PO BOX 2025
LARGO FL 33779

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kenneth E. Webster, Executive Director*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-27-03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARIDIN, MARK D 5778-5TH AVE N SAINT PETERSBURG FL 33710	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED MCBETH, DANIEL D.O. 13417 US HIGHWAY 301, SUITE B DADE CITY FL 33525	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GROVE, JREFFERY 360 CLEARWATER CARLO RD LARGO FL 33770	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KILLINEN, JOHN DO 4000 15TH STREET N ST. PETERSBURG FL 33705	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLCKBURN, ROBERT 10494 NORTH CLIFF BLVD SPRING HILL FL 34608	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JAMES, GREGORY 13540 WALSINGHAM ROAD LARGO FL 33774	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

2-27-03 727-588-9572

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)