2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003
Secretary of State

DOCUMENT# H52006

Entity Name: ASSOCIATES IN GASTROENTEROLOGY, BARBARA A. BACHMAN, M.D., P.A.

Current Principal Place of Business:

4620 N. HABANA AVE.
SUITE 202
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

501 E. KENNEDY BLVD.
STE. 1700
TAMPA, FL 33602

New Mailing Address:

FEI Number: 59-2684823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUMPHRIES, BOB J ESQ
501 EAST KENNEDY BLVD-STE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: BACHMAN, BARBARA ANN
Address: 4620 NORTH HABANA AVENUE, #202
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: BARBARA ANN BACHMAN P 04/17/2003

Electronic Signature of Signing Officer or Director Date