

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED

03 JUN -4 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000003316 **AMENDED**

1. Entity Name
Jay M. Fisher, P.A.



DO NOT WRITE IN THIS SPACE

000020541950
06/05/03--01049--009 **\$61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 100 E. Sybelia Ave.		3. Mailing Address 1501 The Oaks Drive	
Suite, Apt. #, etc. Suite 120		Suite, Apt. #, etc.	
City & State Maitland, FL		City & State Maitland, FL	
Zip 32751	Country USA	Zip 32751	Country USA
4. FEI Number 59-3351603		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Jay M. Fisher	
	Street Address (P.O. Box Number is Not Acceptable) 1501 The Oaks Drive	
	City Maitland	Zip Code FL 32751

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

<p>January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State</p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P	Jay M. Fisher 1501 The Oaks Drive Maitland, FL 32751	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	Wendy E. Fisher 1501 The Oaks Drive Maitland, FL 32751	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  _____

DATE: **5/29/03** DAYTIME PHONE #: **4076283015**

CR2E034B (12/02)

2/6/4