

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000099578

FILED
Apr 13, 2003
Secretary of State

Entity Name: PHILIP J. ROGAL, M.D., P.A.

Current Principal Place of Business:

2809 W WATERS AVENUE
TAMPA, FL US

New Principal Place of Business:

2809 W WATERS AVENUE
TAMPA, FL 33614 US

Current Mailing Address:

2809 W WATERS AVENUE
TAMPA, FL US

New Mailing Address:

2809 W WATERS AVENUE
TAMPA, FL 33614 US

FEI Number: 59-3479547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEAR, L DAVID
401 E. JACKSON ST., 27TH FL
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: D () Delete
Name: ROGAL, PHILIP J
Address: 2809 W WATERS AVENUE
City-St-Zip: TAMPA, FL

Title: S () Delete
Name: ROGAL, SUSAN
Address: 2809 W. WATERS AVE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROGAL, PHILIP J
Address: 2809 W WATERS AVENUE
City-St-Zip: TAMPA, FL 33614

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: PHILIP J ROGAL

D

04/13/2003

Electronic Signature of Signing Officer or Director

Date