2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment wit

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Aug 24, 2001 8:00 am Secretary of State DOCUMENT # 305040 1. Entity Name 08-24-2001 90003 028 ***150.00 PHYSICIANS FINANCIAL PLANNING CORP Principal Place of Business Mailing Address 11820 NW 11TH ST. 11820 NW 11TH ST. P.O. BOX 17856 PLO. BOX 17856 PLANTATION F 33318 PLANTATION FL 33318 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1259850 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name: GOSS. CHESTER F. Street Address (P.O. Box Number is Not Acceptable) 2375 N.E.OCEAN BLVD.#E303 STUART FL 34996 Zip Code City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE GOSS, CHESTER F NAME NAME STREET ADDRESS 2375 NE OCEAN BLVD #E303 STREET ADDRESS CITY-ST-ZIP STUART FL CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME BARTSCH, SHARRON NAME STREET ADDRESS 11820 NW 11TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL GOSS, CHESTER F. BLVD #E303 Change _ _ Addition TITLE, TITI F NAME NAME GOSS, STEPHEN C. STREET ADDRESS STREET ADDRESS 3909 FOXHILL DR. STUART, FL 34996 CITY-ST-ZIP CiTY-ST-7IP ELLICOTT CITY MD TITLE Delete TITI F Change ☐ Addition BARTSCH, SHARRON 11820 NW 11th ST GOSS, ANN C STREET ADDRESS STREET ADDRESS 2375 NE OCEAN BLVD #E303 CITY-ST-ZIP STUART FL CITY-ST-ZIP PLANTATION, FL 33018 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

8-17-2001 561-225-0288

OHOCHMENT D# 305040
CODES45
PHYSICIANS FINANCIAL PLANNING CORP

P. O. BOX 17856 PLANTATION, FL. 33318

TEL: 954-452-8997 FAX: 954-452-8997

August 20, 2001

Florida Department of State Division of Corporations P. O. Box 1500 Tallahassee, Fl. 32302-1500

Enclosed please find completed form UBR 2001, together with \$150.00 check in payment of annual filing fee.

I never received the original form and am responding with what is apparently a second "late" form.

I will appreciate your waiving the penalty fee, which fee would work a hardship on this small business. Physicians Financial Planning Corp. was incorporated in 1966, and has reported on time for all these years. Thank you for your consideration.

Cordially,

Chester F. Goss,

Treasurer

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