2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

476811 DOCUMENT # 1. Entity Name

SIGNATURE:



FILED Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90108 047 ***150.00

DONALI	D D. SHERWIN JR. D.D.S.,	P.A.			200,00
Principal Place of Business 4016 9TH AVENUE WEST . Mailing Address 4016 9TH AVENUE WEST . 4016 9TH AVENUE WEST BRADENTON FL 34205 BRADENTON FL 34205		- ·			
2. Principal Place of Business		3. Mailing Address			1811 BIBH BIBH BIBH BIBH BIRH 1881
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING	CHANGES
City & State		City & State		4. FE! Number 59-1602964	Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired	Not Applicable \$8.75 Additional
	6. Name and Address of Current	Registered Agent			Fee Required
SEYMOU	IR, ELAINE C	-	Name	The second of the wind gladered w	igent
3002 WEST KENNEDY BLVD			Street Address	(P.O. Box Number is Not Acceptable)	
, TAMPA F	L 33609			,	
,			City	FL	Zip Code
The above the obliga	e named entity submits this statement for tions of registered agent.	or the purpose of changing	g its registered office or registe	ered agent, or both, in the State of Florida. I am fa	amiliar with, and accept
SIGNATURE					·
	Signature, typed or printed name of registered agent	and title if applicable. (I	NOTE: Registered Agent signature require	d when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	f State		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS Sherwin Jr, Donald D 1211-62 Street N W Bradenton, Fl 00000	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	O CHIELIO AND	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ميين دروي و دوي المحادث المحاد	Change Addition
TITLE NAME STREET ADDRESS STY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[☐ Change ☐ Addition
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. [☐ Change ☐ Addition
TLE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
Or the corp.	ertify that the information supplied with to on this report or supplemental report is to oration or the receiver or trustee empow or on an attachment with an address, wi	arad ta ayaayta thia		ction 119.07(3)(i), Florida Statutes. I further certify ame legal effect as if made under cath; that I am Florida Statutes; and that my name appears in B	that the information an officer or director lock 10 or Block 11 if