2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 520139 G. RICHARD BAISE, M.D., P.A.

FILED Jan 31, 2001 8:00 am Secretary of State 01-31-2001 90050 041 ***150.00

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Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address	Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WE	RITE IN THIS :	SPACE		
S. Certicode or Status Desired C Status	City & State		City & State		4. F	FEI Number 59-1704571					
BAISE, G. RICHARD 3870 BENEVA OAKS DR SARASOTA FL 34238 6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fronta. SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filting requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE TIME MAKE SIREE ADDRESS ORY-S1-2P THE MAKE STREET ADDRESS ORY-S1-2P THE MAKE SIREET ADDRESS ORY-S1-2P THE MAKE SIRET ADDRESS ORY-S1-	Zip	Country	Zip	Country	5. (Certificate of	Status Desired				
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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 9. This corporation is eligible to satisfy its Intangible Tax illing requirement and elects to do so. Mater MAY 1, 2001 Fee will be \$550,00 Mater MAY 1, 2001 Fee will be	SAR	ASOTA FL 34238									
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR