2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 575644

1. Entity Name

LAWRENCE K. COOK, D.D.S., P.A.



FILED Mar 13, 2003 8:00 am Secretary of State

03-13-2003 90086 023 ***150.00

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Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGE City & State City & State City & State Country Zip Country S. Certificate of Status Desired Sec. Psee Required 6. Name and Address of Current Registered Agent Name Name Name Street Address of New Registered Agent Name Street Address (PO. Box Number is Not Acceptable) 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. 1 am familiar with the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligations of registered agent. Not the state of Florida is a manufacture of the obligation of registered agent. Not the state of Florida is a manufacture of the obligation of registered agent. Not the state of Florida is a manufacture of the obligation of registered agent. Name Not the obligation of registered agent. Not the obligation of	fi Birki Birli Golf	6) 6 1 81) 6181) 6181) 6181) 6	I (absal aliki spak bina aliki alah bisi bisi bisi		AVENUE	SOUTH KENTUCKY	407	ss V ENUE	KENTUCKY A	407 SOUTH
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6. Name and Address of Current Registered Agent COOK, LAWRENCE K. 407 SOUTH KENTUCKY AVENUE LAKELAND FL City City City City FL Zip Co City FL Zip Co City FL Zip Co Registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent and title # applicable. City FL Zip Co Registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent and title # applicable. City FL Zip Co City FL Zip Co Registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent and title # applicable. City FL Zip Co Registered Agent signature required when rematating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE NAME COOK, LAWRENCE K 407 S KENTUCKY AVE LAKELAND FL Delete TITLE NAME STREET ADDRESS CITY-ST-Zip Delete TITLE NAME STREET ADDRESS CITY-ST-Zip AMAE STREET ADDRESS CITY-ST-Zip NAME STREET ADDRESS CITY-ST-Zip CITY-ST-Zip ACCOUNTY-ST-Zip CITY-ST-Zip CITY-ST-Zi	Applied For	59-1836092			City & State			ate C		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the indicated on this report or supplemental report is true and accurate and that my signature shall be at the case indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the indicated on this report or supplemental report is true and accurate and that my signature shall be at the case indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the indicated on this report or supplemental report is true and accurate and that my signature shall be at the case indicated.	☐ Addition	_ ,			NAME STREET ADDRESS CITY-ST-ZIP	-				NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with

QUIRLawrence K. Cook

(863)688-1537