2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Kevin Salschroeder M.D.

Feb 03, 2002 8:00 am Secretary of State DOCUMENT # 601095 1. Entity Name STOUTAMYER, STRATOS, SCHROEDER, WHALEY, RIZZO & 02-03-2002 90005 031 ***150.00 ASSOCIATES, M.D.'S, P.A. Principal Place of Business Mailing Address 2010 59TH STREET WEST SUITE 1500 2010 59TH STREET WEST SUITE 1500 **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 2010 59th Street West 3. Mailing Address 2010 59th Street West Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 1500 Suite 1500 Applied For Bradenton, FL Bradenton, FL 4. FEI Number 59-1266561 Not Applicable Country Country \$8.75 Additional 34209 5. Certificate of Status Desired 34209 Manatee Manatee Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHROEDER, K S Street Address (P.O. Box Number is Not Acceptable) 2010 59TH STREET WEST **SUITE 1500 BRADENTON FL 34209** 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) ☐ Addition TITLE Delete P/T SCHROEDER, K.S. NAME NAME 2010 59TH STREET WEST SUITE 1500 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP X Change Addition ☐ Delete TITLE RIZZO, ANTHONY J. NAME STREET ADDRESS 2010 59TH STREET WEST SUITE 1500 STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34209 CITY-ST-ZIP ☐ Addition TITLE VΡ ☐ Delete TITLE NAME BLAUSTEIN, PHILIP A NAME STREET ADDRESS STREET ADDRESS 2010 59TH STREET WEST, SUITE 1500 **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME Ainbinder, Martin B. STREET ADDRESS STREET ADDRESS 2010 59th Street West, Suite 1500 CITY-ST-ZIP CITY-ST-ZIP Bradenton, FL 34209 ▼ Addition ☐ Delete TITLE Change TITLE NAME NAMÉ Bulley, David A. STREET ADDRESS STREET ADDRESS 2010 59th Street West, Suite 1500 CITY-ST-7IP CITY-ST-ZIP Bradenton, FL 34209 TITLE ☐ Delete TITLE 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 togal effect as if made under oath; that am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Charter 37, Florida Statutes, and that my name appears in Block 11 or Block 12 in changed, or on an attachment with an address, with all other like empowered.

FILED

nd that my name appears in Block 11 or Block 12 if

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