

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 601331

1. Entity Name

WAYNE O. SMITH, D.D.S., P.A.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90196 028 ***150.00

Principal Place of Business

777 37TH ST
STE D-107
VERO BCH FL 32960
US

Mailing Address

777 37TH ST
STE D-107
VERO BCH FL 32960-7302
US

2. Principal Place of Business

777 37th ST
Suite, Apt. #, etc.
D 107

3. Mailing Address

777 37th ST
Suite, Apt. #, etc.
D 107



DO NOT WRITE IN THIS SPACE

City & State
VERO BEACH FL

City & State
VERO BEACH FL

4. FEI Number 59-1268809

Applied For
Not Applicable

Zip
32960

Country
USA

Zip
32960

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, WAYNE O
1501 PRESIDENTIAL WAY #7
WEST PALM BEACH FL 33401

Name
SMITH, WAYNE O.
Street Address (P.O. Box Number is Not Acceptable)
777 37th ST
D 107
City
VERO BEACH FL Zip Code
32960

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 Wayne O. Smith Date May 1/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, WAYNE O 1501 PRESIDENTIAL WAY #7 WEST PALM BEACH FL 33401	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, WAYNE O. 777 37 th ST. D 107 VERO BEACH FL 32960	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne O. Smith Date May 1/00 (561) 567-6527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)