

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State
 02-19-2002 90083 043 ***150.00

DOCUMENT # 601731

1. Entity Name
REID, LENTZ AND ASSOCIATES, P.A.

Principal Place of Business
 13005 SOUTHERN BLVD
 SUITE 142
 LOXAHATCHEE FL 33470
 US

Mailing Address
 PO BOX 1067
 LOXAHATCHEE FL 33470
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 11369 Okeechobee Blvd

3. Mailing Address

Suite, Apt. #, etc.
 300

Suite, Apt. #, etc.

City & State
 Royal Palm Bch FL

City & State

4. FEI Number
 59-1281682

Applied For
 Not Applicable

Zip
 33411

Country
 Palm Beach

Zip

Country

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

ROCHEFORT, LAWRENCE ESQ
 777 S. FLAGLER DRIVE
 SUITE 900 EAST
 WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME REID, LAWRENCE R
STREET ADDRESS 13005 SOUTHERN BLVD., STE. 142
CITY-ST-ZIP LOXAHATCHEE FL 33470

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11369 Okeechobee Blvd. Ste. 300
CITY-ST-ZIP Royal Palm Beach, FL 33411

TITLE S ☐ Delete
NAME LENTZ, ROBERT M.D.
STREET ADDRESS 13005 SOUTHERN BLVD., STE. 142
CITY-ST-ZIP LOXAHATCHEE FL 33470

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11369 Okeechobee Blvd. Ste. 300
CITY-ST-ZIP Royal Palm Beach, FL 33411

TITLE T ☐ Delete
NAME REID, LAWRENCE R
STREET ADDRESS 13005 SOUTHERN BLVD., STE. 142
CITY-ST-ZIP LOXAHATCHEE FL 33470

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11369 Okeechobee Blvd. Ste. 300
CITY-ST-ZIP Royal Palm Beach FL 33411

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Lawrence Reid

1-30-02

561-795-7731

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)