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## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jan 29, 2001 8:00 am Secretary of State DOCUMENT # 601811 WINTER PARK UROLOGY ASSOCIATES, PROFESSIONAL ASS 01-29-2001 90169 035 \*\*\*150.00 Principal Place of Business Mailing Address 80501 1812 NORTH MILLS AVE 1812 NORTH MILLS AVE ORLANDO FL 32803 ORLANDO FL 32803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FFI Number 59-1277954 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent VAUGHAN, DAVID J JR, MD Street Address (P.O. Box Number is Not Acceptable) 1812 NORTH MILLS AVE ORLANDO FL 32803 Zip Code FL 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) 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, 2001 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Asst. Treas & Sect. Change TITLE ☐ Delete **GUNDIAN, JULIO C** David H. Jublonski NAME 1812 North Mills Ave. 1812 NORTH MILLS AVE STREET ADDRESS STREET ADDRESS orlando, Florida ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP 32803 Assistant Secretary TITLE Change ☐ Addition TITLE ☐ Delete Donald V. Jablonsk JABLONSKI, DONALD NAME NAME 1812 NORTH MILLS AVE. STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP Asst. Sect. Rivera - Rameriz **Addition** ☐ Change ☐ Delete TITLE TITLE VAUGHAN, DAVID 1812 North Mills Ave Invel NAME NAME 1812 NORTH MILLS AVE. STREET ADDRESS STREET ADDRESS orlando, Florida 32803 ORLANDO FL CITY-ST-ZIP CITY-ST-7IP Vice President Change □ Defete ☐ Addition TITLE TITLE KLAIMAN, ALLAN P NAME NAME 1812 NORTH MILLS AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-7IP CITY-ST-7IP Secretary Teffrey R. Thill 1812 North Mills Ave Change TITLE ☐ Delete TITLE ☐ Addition THILL JEFFREY R NAME NAME 1812 N MILLS AVE STREET ADDRESS STREET ADDRESS Orlando, Florida ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS Orlando Florida 32803

13. 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 information indicated on this report or supplied either that I am an officer or director of the corporation or the receiver or trusted 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.

CITY-ST-ZIP

SIGNATURÆ:

CJTY-ST-ZIP

SIGNATURE AND TYPED OF RINTED NAME OF SIGNING OFFICER OR DIRECTOR

David J. Vaughan, Jr 1/17/01