FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Mar 11, 2002 8:00 am Secretary of State 603060 DOCUMENT # 1. Entity Name 03-11-2002 90021 014 ***150.00 GANEY, GANEY, GESTRICH, & ORBAN, M.D.'S, P.A. Principal Place of Business Mailing Address 501 2ND STREET W. 501 2ND STREET W. **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1360214 Not Applicable Zip Country Zip Country **\$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 GANEY, JOSEPH B., JR. Street Address (P.O. Box Number is Not Acceptable) 501 2ND STREET W. **BRADENTON FL 34205** City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition NAME GANEY, THOMAS H. NAME STREET ADDRESS 501 2ND STREET W. STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE GANEY, JOSEPH B. JR. NAME NAME STREET ADDRESS STREET ADDRESS 501 2ND STREET W. CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL** TITLE Delete TITLE ☐ Change ☐ Addition NAME GESTRICH, ERIC F NAME STREET ADDRESS STREET ADDRESS **501 2 ST WEST** CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** Delete Change TITLE TITLE ☐ Addition NAME ORBAN, LEONARD B NAME STREET ADDRESS STREET ADDRESS 501 2 ST W CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34205 TITLE Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition ☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF