

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 611572

FILED
May 23, 2003
Secretary of State

Entity Name: JAY S. REESE, M.D. - TEMPLE TERRACE PROFESSIONALAL ASSOCIATION

Current Principal Place of Business:

10320 N 56TH ST
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

Current Mailing Address:

10320 N 56TH ST
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 59-1923768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REESE, JAY S.
10320 N 56TH ST
TEMPLE TERRACE, FL 33617

Name and Address of New Registered Agent:

REESE, JAY S
10320 N 56TH ST,
SUITE 100
TEMPLE TERRACE, FL 33617

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: JAY S. REESE

05/23/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REESE, JAY S,
Address: 10320 N 56TH ST
City-St-Zip: TEMPLE TERR, FL 00000, 33617

Title: PST () Delete
Name: REESE, JAY S,
Address: 10320 N 56TH
City-St-Zip: TEMPLE TERR, FL 00000, 33617

Title: V () Delete
Name: REESE, ANN E.
Address: 4818 LONDONDERRY DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAY S. REESE

P D

05/23/2003

Electronic Signature of Signing Officer or Director

Date