## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Feb 24, 2003 8:00 am Secretary of State

DOCUMENT # 644582  1. Entity Name WM. O. DEWEESE, M.D., P.A.							02 07	2003 90078		
Principal Place of Business 5106 N ARMENIA AV TAMPA FL 33603 US			Mailing Address 5106 N ARMENIA AV TAMPA FL 33606 US	5108 n Armenia av Tampa fl 33606						
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Suite, Ap			Suite, Apt. #, etc.	<del></del>	N		☐ CHECK HERE IF MAKING CHANGES			
City & Sta	ate		City & State		H	4. FEI N	lumber 59-194662	29	<del></del>	Applied For
Zip		Country	Zip	Coun	ntry	5. Certif	icate of Status Desired	ı 🗆 \$8	3.75 A	Not Applicab dditional red
Ä.	6. Name (	and Address of Curr	rrent Registered Agent		T	7. Name	and Address of New	— Fe	e Requi	red
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