2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 683725

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 683725 1. Entity Name R.L. BOLLINGER, PH. D. AND J.C. KEMP, PH.D., PA						FILED Mar 08, 2001 8:00 am Secretary of State 03-08-2001 90122 048 ***150.00				
H'F' BOI	LLINGER, PH. D. AND J.C. KE	MP, PH.D., PA				(03-08-2001 901:	22 048 **	*150.00	0
Principal Plac										
903 MIRAMAR DRIVE DELRAY BEACH FL 33483		903 MIRAMAR DRIVE DELRAY BEACH FL 33483				I Ikani da da da		23203		8:5:: : 185:
2. Principal Place of Business		3. Mailing Address						8 1 1 1 1 1 1 1 1 1		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State			4.	FEI Number	59-2105238			plied For Applicable
Zip Country		Zip Cou		try	5.	5. Certificate of Status Desired S8.75 Add Fee Required			. 75 Addi	itional
	6. Name and Address of Current R	legistered Agent			7.		dress of New Regi		nt	
Same of the same of the same same of the s				-≁Name			at mentions of the second			
903	LINGER, RICK L MIRAMAR DRIVE		Street Address			(P.O. Box Number is Not Acceptable)				
DELF	RAY BEACH FL 33483						7:			
				City				FL	Zip Code	,
SIGNATURE	signature, typed or printed name of registered egent are contained in the signature. It is a selected to the selected the sele		:: Registere	d Agent signat	ure required when	reinstating)	on Campaign Financ	DATE) May Be
_	ria on back)	Make Check Payab				Trust	Fund Contribution,		Added	to Fees
11.	OFFICERS AND D	DIRECTORS	12.		A	DDITIONS/CH	ANGES TO OFFICE	RS AND DIF	ECTORS	IN 11
NAME STREET ADDRESS CITY-ST-ZIP	VD KEMP, JAMES C 472 6 SW 67TH AVE: #F-1 0 MIAMI FL 33155 -	☐ Delete		E Et address			nar briv	- د	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOLLINGER, RICK L 4720 SW 67TH AVE. #F-10 MIAMI FL 33155	□ Delete		E Et address -St-zip	gas M Delr	liram. Ly Be	h, 2d 3. ar Drive ach, IL	Z : :33 4/8	Change	Addition
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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 exidence, with all other like empowered.