

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 705514

FILED  
Apr 21, 2003  
Secretary of State

Entity Name: THE FLORIDA ASSOCIATION OF ORTHODONTISTS, INC.

## Current Principal Place of Business:

LISSETTE LEMES  
5100 BURCHETTE RD #3300  
TAMPA, FL 33647 US

## New Principal Place of Business:

LISSETTE ADKINS  
5100 BURCHETTE RD #3300  
TAMPA, FL 33647 US

## Current Mailing Address:

LISSETTE LEMES  
5100 BURCHETTE RD #3300  
TAMPA, FL 33647 US

## New Mailing Address:

LISSETTE ADKINS  
5100 BURCHETTE RD #3300  
TAMPA, FL 33647 US

FEI Number: 59-1313117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEMES, LISSETTE M MS.  
5100 BURCHETTE RD #3300  
TAMPA, FL 33647 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CHAPMAN, STEVE A DR  
Address: 3520 ST. JOHNS AVE  
City-St-Zip: PALATKA, FL 32177 US

Title: T ( ) Delete  
Name: JACOBUS, BRIAN B DR  
Address: 1100 SW ST LUCIE W BLVD #207  
City-St-Zip: PORT ST. LUCIE, FL 32250 US

Title: V ( ) Delete  
Name: GOLDIE, ROBERT S DR  
Address: 7051 DR. PHILLIPS BLVD #9  
City-St-Zip: ORLANDO, FL 32819 US

Title: S ( ) Delete  
Name: CARDEN, DAVID R DR  
Address: 3540 S THIRD ST  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D ( ) Delete  
Name: CORO, JORGE DR  
Address: 878 S. DIXIE HWY  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: TAPLEY, PATRICIA M DR.  
Address: 320 NORTHWEST 76TH DR  
City-St-Zip: GAINESVILLE, FL 32607 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GOLDIE, ROBERT S DR  
Address: 7051 DR. PHILLIPS BLVD #9  
City-St-Zip: ORLANDO, FL 32619 US

Title: V (X) Change ( ) Addition  
Name: CARDEN, DAVID R DR  
Address: 3540 S THIRD ST  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: S (X) Change ( ) Addition  
Name: JACOBUS, BRIAN B DR  
Address: 1100 SW ST. LUCIE W BLVD #207  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: T (X) Change ( ) Addition  
Name: CORO, JORGE DR  
Address: 896 S DIXIE HWY  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: D (X) Change ( ) Addition  
Name: TAPLEY, PATRICIA M DR  
Address: 320 NORTHWEST 76TH DR  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D (X) Change ( ) Addition  
Name: RIGSBY, RANDALL P DR.  
Address: 3969 SPANISH TRAIL  
City-St-Zip: PENSECOLA, FL 32504 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT GOLDIE

P

04/21/2003

Electronic Signature of Signing Officer or Director

Date