

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714103

1. Entity Name

ORANGE COUNTY MEDICAL SOCIETY OF FLORIDA, INCORP

Principal Place of Business

2304 ALOMA AVE
STE 100
WINTER PARK FL 32792
US

Mailing Address

2304 ALOMA AVE
STE 100
WINTER PARK FL 32792
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0746887

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, KIM
2304 ALOMA AVE
STE 100
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name MICHAEL R. SCHAFER

Street Address (P.O. Box Number is Not Acceptable)

800 S. ORLANDO AVE #100

City MAITLAND

FL

Zip Code 32751

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 MICHAEL R. SCHAFER

Miller S

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7/12/01

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME S
STREET ADDRESS HARDING, DAVID R.
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

TITLE ☐ Delete
NAME T
STREET ADDRESS NATHANSON, IAN T
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

TITLE ☒ Delete
NAME PD
STREET ADDRESS STIEG, FRANK H. III
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

TITLE ☐ Delete
NAME PE
STREET ADDRESS JOHNSON, GENNETT
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

TITLE ☐ Delete
NAME VP
STREET ADDRESS ROBERTS, VICTOR L
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

TITLE ☒ Delete
NAME D
STREET ADDRESS FOY, DONALD F.
CITY-ST-ZIP 2304 ALOMA AVE STE 100
WINTER PARK FL 32792

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME PER D
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME VP
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME T GREENBERG, HAROLD L.
STREET ADDRESS 235 S. MAITLAND AVE #
CITY-ST-ZIP MAITLAND, FL 32751

TITLE ☒ Change ☐ Addition
NAME PAST PRESIDENT D
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME P
STREET ADDRESS ROBERTS, VICTOR L
CITY-ST-ZIP 100 W. GORE ST. #300
ORLANDO, FL 32806

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS POOLE, DAND
CITY-ST-ZIP 773 DOUGLAS AVE
ADAMONTE SPRINGS, FL 32714

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL R. SCHAFER 7/12/01 407-839-3330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)