## 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#714103** 

Apr 30, 2002 8:00 AM Secretary of State

Entity Name: ORANGE COUNTY MEDICAL SOCIETY OF FLORIDA, INCORPORATED

**Current Principal Place of Business:** New Principal Place of Business:

2304 ALOMA AVE 901 N. LAKE DESTINY DRIVE

STE 100 STE 385

WINTER PARK, FL 32792 US MAITLAND, FL 32751

**Current Mailing Address: New Mailing Address:** 

2304 ALOMA AVE 901 N. LAKE DESTINY DRIVE **STE 100** STE 385

WINTER PARK, FL 32792 US MAITLAND, FL 32751 US

FEI Number: 59-0746887 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHAFER, MICHAEL R 800 S ORLÁNDO AVENUE STE 100 MAITLAND, FL 32751

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

HARDING, DAVID R. HARDING, DAVID R. Name: Name: 2304 ALOMA AVE STE 100 Address: 901 N. LAKE DESTINY DRIVE, SUITE 385 Address:

WINTER PARK, FL 32792 MAITLAND, FL 32751

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition NATHANSON, IAN T Name: NATHANSON, IAN T Name:

Address: 2304 ALOMA AVE STE 100 Address: 901 N. LAKE DESTINY DRIVE, SUITE 385

City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: MAITLAND, FL 32751

Title: () Delete Title: (X) Change ( ) Addition GREENBERG, HAROLD L GREENBERG, HAROLD L Name: Name:

235 S MAITLAND AVENUE 235 S MAITLAND AVENUE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751

(X) Change ( ) Addition Title: () Delete Title: ELLIS, GEORGE Name: JOHNSON, GENNETT Name:

2304 ALOMA AVE STE 100 901 N. LAKE DESTINY DRIVE, SUITE 385 Address: Address:

City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: MAITLAND, FL 32751

Title: () Delete Title: (X) Change ( ) Addition

ROBERTS, VICTOR L ROBERTS, VICTOR L Name: Name: 100 W GORE ST # 300 100 W GORE ST # 300 Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806

Title: () Delete Title: (X) Change ( ) Addition

POOLE, DAVID POOLE, DAVID Name: Name: Address: 773 DOUGLAS AVENUE Address: 773 DOUGLAS AVENUE

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID HARDING Ρ 04/30/2002