

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F50982

1. Entity Name

RICHARD J. EATROFF, M.D., P.A.

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90009 040 ***750.00

Principal Place of Business

403 VONDERBURG DRIVE
SUITE 202
BRANDON FL 33511
US

Mailing Address

403 VONDERBURG DRIVE
SUITE 202
BRANDON FL 33511
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2131867

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HINES, JAMES P
315 HYDE PARK AVENUE
TAMPA FL 33606

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
EATROFF, RICHARD J MD
403 VONDERBURG DRIVE, SUITE 202
BRANDON FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
EATROFF, LOUISE G
403 VONDERBURG DRIVE, SUITE 202
BRANDON FL ☐ Delete

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

TITLE
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☐ Delete

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

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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

750982

BO 0000 BO103577

Attachment

RICHARD J. EATROFF, M.D., P.A.
GASTROENTEROLOGY

403 VONDERBURG DRIVE
SUITE 202
BRANDON, FLORIDA 33511
(813) 685-5000

DIPLOMATE
AMERICAN BOARD OF GASTROENTEROLOGY
AND INTERNAL MEDICINE

July 20, 2000

Florida Department of State
Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314


To Whom It May Concern:

We received our 2000 Uniform Business Report last week and it stated it was a second notice due by September 13, 2000. Because there was a \$550.00 fee for filing and last year our fee was only \$150.00, I called your office and was told that if I wrote a letter explaining that we never received any other notice this year the additional charges could be waived. This is the first and only notice that we have received regarding this form.

Please accept our filing fee of \$150.00 at this time. I was advised by your office that we should receive this form every year by the first of February at the latest and that if we did not, we were to call at that time.

Thank you in advance for your consideration on this matter.

Sincerely,



Richard J. Eatroff, M.D.

RJE/dm