

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F60971

FILED
Jan 18, 2002 8:00 AM
Secretary of State

Entity Name: ALAN J. FRANK, D.D.S., P.A.

Current Principal Place of Business:

% ALAN J FRANK, D.D.S.
3300 SOUTH TAMiami TRAIL, STE 2
SARASOTA, FL 34239

New Principal Place of Business:

% ALAN J FRANK, D.D.S.
3313 OSPREY AVENUE SOUTH
SARASOTA, FL 34239

Current Mailing Address:

3300 SOUTH TAMiami TRAIL
SUITE 2
SARASOTA, FL 34239 US

New Mailing Address:

5032 MAHOGANY RUN AVENUE
SARASOTA, FL 34241 US

FEI Number: 59-2144365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, ALAN J., D.D.S.
3300 SOUTH TAMiami TRAIL, STE 2
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

FRANK, ALAN J., D.D.S.
5032 MAHOGANY RUN AVENUE
SARASOTA, FL 34241 US

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: ALAN J FRANK DDS

01/18/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FRANK, ALAN J DDS
Address: 7000 WILDHORSE CIR
City-St-Zip: SARASOTA, FL 34241

Title: ST () Delete
Name: FRANK, ALAN J DDS
Address: 7000 WILDHORSE CIR
City-St-Zip: SARASOTA, FL 34241

Title: AT () Delete
Name: FRANK, SHARYN
Address: 7000 WILDHORSE CIR
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FRANK, ALAN J DDS
Address: 5032 MAHOGANY RUN AVENUE
City-St-Zip: SARASOTA, FL 34241

Title: ST (X) Change () Addition
Name: FRANK, ALAN J DDS
Address: 5032 MAHOGANY RUN AVENUE
City-St-Zip: SARASOTA, FL 34241

Title: AT (X) Change () Addition
Name: FRANK, SHARYN L
Address: 5032 MAHOGANY RUN AVENUE
City-St-Zip: SARASOTA, FL 34241

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

SIGNATURE: ALAN J FRANK DDS

DP

01/18/2002

Electronic Signature of Signing Officer or Director

Date