2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**)

F78514 **DOCUMENT #**

1. Entity Name

GULF COAST PHYSICIAN PARTNERS, P.A.



FILED

Secretary of State

02-10-2003 90239 040 ***150.00

Feb 10, 2003 8:00 am

Principal Place of Business Mailing Address 20021011 4501 N. DAVIS HWY., STE. A 4501 N. DAVIS HWY., STE, A PENSACOLA FL 32503 PENSACOLA FL 32503 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2191195 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name IRVIN, JR., E. COY Street Address (P.O. Box Number is Not Acceptable) 4501 N. DAVIS HWY., STE. A PENSACOLA FL 32503 City 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. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. MDTITLE Change Change ☐ Addition TITLE ☐ Deleté IRVIN, E. COY J R NAME NAME 4501 N. DAVIS HWY. STE A STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-ZIP CITY-ST-ZIP VD TITLE ΜD Change ☐ Addition □ Delete TITLE YOUNG, DAVID B NAME NAME STREET ADDRESS 4501 N. DAVIS HWY, STE A STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL MD Change ☐ Addition TITLE Delete TITLE BRANNON, H. DAVID NAME NAME STREET ADDRESS STREET ADDRESS 4501 N DAVIS HWY, STE A CITY-ST-7IP CITY-ST-ZIP PENSACOLA FL ☐ Delete TITLE Change Change ☐ Addition TITLE TD MAYEALL, DENNIS MAYEAUX. DENNIS ENNIS NAME NAME STREET ADDRESS STREET ADDRESS 4501 N. DAVIS HWY., STE. A CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32503 **VD** ☐ Delete TITLE **∠**Change Addition TITLE WYROSDICK, CRAIG NAME NAME STREET ADDRESS 4501 N. DAVIS HWY., STE. A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32503 ☐ Addition Delete TITI F ☐ Change TITLE MCLEOD, PAUL A NAME NAME STREET ADDRESS 4501 N. DAVIS HWY., STE. A STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32503 CITY-ST-ZIP

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: Date Daytime Phone #

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Affachment 90021811 778514

MD Whibbs, William J 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

PD Snow, Karen G 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

MD Belk, William W 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

MD Lewis, Janet 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

MD Le Thi, Bach-Uyen 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

MD Williams, William E 4501 N. Davis Hwy, Suite A Pensacola, FL 32503

MD Varnadore, William E. 4501 N. Davis Hwy, Suite A Pensacola, FL 32503