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

DOCUMENT # F9400001979  1. Entity Name ORNDA OF SOUTH FLORIDA, INC.					O3 APR 17 PM 4: 02	
Principal Place of Business 3820 STATE STREET SANTA BARBARA CA 93105		Mailing Address % MARY H. YUMIBE 3820 STATE STREET SANTA BARBARA CA 93105		100	SECRETARY OF STATE TALLAHASSEE, FLORIDA	44. 1 <b>0.</b> 1
2. Principal Place of Business		3. Mailing Address			-	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<del></del>	☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 65-0482175 Applied Not App	
Zip Country		Zip	Country		S. Certificate of Status Desired	
	6. Name and Address of Current	gistered Agent			7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Name Street Address (P.O. Box Number is Not Acceptable)		
				City	FL J Zip Code	
SIGNATURE F	Signature, typed or printed name of registered agent a FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of		Registere	d Agent signature required	9. Election Campaign Financing \$5.00 Ma  Trust Fund Contribution.	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	<del></del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEIGMAN, DONALD S 500 W. CYPRESS CREEK RD. FORT LAUDERDALE FL 33309	☐ Delete	TITLE NAM STRE	i	<del></del>	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SILVER, RICHARD B 3820 STATE STREET SANTA BARBARA CA 93105	☐ Delete	•	1	☐ Change ☐ A	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DENT, DENNIS L 3820 STATE STREET SANTA BARBARA CA 93105	☐ Delete		í	☐ Change ☐ A	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LARSEN, CAITLIN 3820 STATE STREET SANTA BARBARA CA 93105	TATE STREET ST		ł	☐ Change ☐ £	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l	☐ Change ☐ A	Addition
TITLE Name Street address City-St-Zip		□ Delete			☐ Change ☐ A	Addition
indicated	on this report or supplemental report is	true and accurate and that my	/ signat	ure shall have the s	ction 119.07(3)(i), Florida Statutes. I further certify that the informa same legal effect as if made under oath; that I am an officer or dire , Florida Statutes; and that my name appears in Block 10 or Block	ector

SIGNATURE:

4/10/03 Date

Daytime Phone #