

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000004927

1. Entity Name

CERTIFIED DIABETIC SUPPLIES INC.

Principal Place of Business

2373 HORSESHOE DRIVE SOUTH
NAPLES FL 34104

Mailing Address

2373 HORSESHOE DRIVE SOUTH
NAPLES FL 34104

2. Principal Place of Business

3030 Horseshoe Drive South

Suite, Apt. #, etc.

200

City & State

Zip

Country

3. Mailing Address

3030 Horseshoe Drive South

Suite, Apt. #, etc.

200

City & State

Zip

Country

9/7/01

DO NOT WRITE IN THIS SPACE

90004001-22000

4. FEI Number

65-0613873

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
1406 HAYS ST., STE 2
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name Alan B Fields

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

3030 Horseshoe Drive South Suite 200

City Naples

FL

Zip Code

34104

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

Alan B Fields

8/28/01

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 12, 2001 Fee 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

TITLE DC
NAME FISCINA, PETER J
STREET ADDRESS 2373 HORSESHOE DR S
CITY-ST-ZIP NAPLES FL 34104 ☒ Delete

TITLE DVC
NAME AYALA, ALBERT R
STREET ADDRESS 2373 HORSESHOE DR S
CITY-ST-ZIP NAPLES FL 34104 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D P
NAME Peterson, Brent
STREET ADDRESS 3030 Horseshoe Drive South Suite 200
CITY-ST-ZIP Naples FL 34104 ☐ Change ☒ Addition

TITLE D V
NAME Fields, Alan B.
STREET ADDRESS 3030 Horseshoe Drive South Suite 200
CITY-ST-ZIP Naples FL 34104 ☐ Change ☒ Addition

TITLE D
NAME Eric, Elroy E.
STREET ADDRESS 3030 Horseshoe Drive South Suite 200
CITY-ST-ZIP Naples FL 34104 ☐ Change ☒ Addition

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

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

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

President

8/28/01

941.430.5000



FILED

01 DEC 27 PM 4:02

SECRETARY OF STATE

TALLAHASSEE, FLORIDA