

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G17369

FILED
Apr 25, 2002 8:00 AM
Secretary of State

Entity Name: PORTER, CHITTY & PIRKLE, M.D., P.A.

Current Principal Place of Business:

1100 N.W. 95TH ST.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

5401 POLK ST
HOLLYWOOD, FL 33021 US

New Mailing Address:

3900 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD, FL 33021

FEI Number: 59-2256221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN, JUDSON L III
155 NW 167 ST
STE 200
NMB, FL 33169 US

Name and Address of New Registered Agent:

ST-CYR, ISABELLE
3900 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD, FL 33021

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: ISABELLE ST-CYR

04/25/2002

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: DT () Delete
Name: PORTER, JAMES W MD
Address: 1100 N W 95TH ST
City-St-Zip: MIAMI, FL

Title: DP () Delete
Name: PIRKLE, MICHAEL
Address: 1100 NW 95TH ST
City-St-Zip: MIAMI, FL 33150

Title: DS () Delete
Name: CHITTY, KAREN B MD
Address: 1100 NW 95TH ST
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: PORTER, JAMES W
Address: 1100 NW 95TH ST
City-St-Zip: MIAMI, FL 33150

Title: DP (X) Change () Addition
Name: PIRKLE, MICHAEL S
Address: 1100 NW 95TH ST
City-St-Zip: MIAMI, FL 33150

Title: DS (X) Change () Addition
Name: CHITTY, KAREN B
Address: 1100 NW 95TH ST
City-St-Zip: MIAMI, FL 33150

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: JAMES PORTER

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04/25/2002

Electronic Signature of Signing Officer or Director

Date