04/23/2003 09:37 813-254-8705 DAK INC

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91301 046 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H09341

1. Entity Name: ALAN H. CARR, D.O. P.A.

DO NOT WRITE IN THIS SPACE

11024105

2. Principal Place of Business: 12141 Shakespeare Trail
Suite, Apt. #, etc.
City & State: ST. Leo, FL
Zip: 335-74 Country: PASCO

3. Mailing Address: P.O. Box 476
Suite, Apt. #, etc.
City & State: San Antonio, FL
Zip: 33576 Country: PASCO

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2415949 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: ALAN H. CARR
Street Address (P.O. Box Number is Not Acceptable): 12141 Shakespeare TRAIL
City: ST. Leo FL Zip Code: 33574

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.

SIGNATURE: Alan H. Carr, D.O. 25 April 03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

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CR2E004B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Alan H. Carr D.O. ALAN H. CARR, D.O. 25 April 03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

certified 7001 2510 0006 9718 9624