

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90095 026 \*\*\*150.00

DOCUMENT # K18505

1. Entity Name

Roderick M. Fitz-Randolph, Jr., MD PA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

16618 Villalenda de Avila

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Zip

33613-5200

Country

USA

Zip

Country

4. FEI Number

59-2873834

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Roderick M. Fitz-Randolph, Jr.

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

16618 Villalenda de Avila

City

Tampa

FL

Zip Code

33613-5200

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

*Roderick M. Fitz-Randolph, Jr.*

Roderick M. Fitz-Randolph, Jr.

DATE

4/25/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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 P, VP, D  
NAME Roderick M. Fitz-Randolph,  
STREET ADDRESS 16618 Villalenda de Avila  
CITY - ST - ZIP Tampa, FL 33613-5200

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Roderick M. Fitz-Randolph, Jr.*

Roderick M. Fitz-Randolph, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #