

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90739 034 ***150.00

DOCUMENT # K51661

1. Entity Name

NYER MEDICAL GROUP, INC

DO NOT WRITE IN THIS SPACE

80062067

2. Principal Place of Business
1292 HAMMOND STREET

3. Mailing Address
1292 HAMMOND STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
BANGOR, ME 04401

City & State
BANGOR, ME 04401

4. FEI Number
65--147945

Applied For
Not Applicable

Zip
04401

Country
USA

Zip
04401

Country
USA

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
HARRIS, MICHAEL D.

Street Address (P.O. Box Number is Not Acceptable)
1645 PALM BEACH LAKES BLVD. SUITE 550

City
WEST PALM BEACH, FL 33401

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

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
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
LEWIS, DON
72CENTER ST BREWER, ME 04412**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
WRIGHT, KAREN L.
1292 HAMMOND ST BANGOR ME 04401**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
CLIFFORD, WILLIAM J JR
1292 HAMMOND ST BANGOR, ME 04401**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
DUDRICK, STANLEY
1292 HAMMOND ST BANGOR, ME 04401**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
NYER, KENNETH MD NEW ROCHELLE,
48 OLD ORCHARD RD, NY 10804**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
BARRETT, ROBERT III
1292 HAMMOND ST BANGOR, ME 04401**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM J CLIFFORD, JR 3-29-02 207-942-5273

Date

Daytime Phone

CR2E034B (12/01)

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UNIFORM BUSINESS REPORT (UBR)**

Attachment
B0062067

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Added to Fees

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TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
MAZZOLA, DONATO
1292 HAMMOND ST BANGOR, ME 04401

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
P
NYER, SAMUEL
1292 HAMMOND ST, BANGOR, ME 04401

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
PRINCE, RANDY
1292 HAMMOND ST BANGOR, ME 04401

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
SCHWEIGER, JIM
1292 HAMMOND ST, BANGOR ME 04401

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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Date

Daytime Phone #

CR2E034B (12/01)