

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K55264

FILED  
Apr 23, 2002 8:00 AM  
Secretary of State

Entity Name: DAVID J. BENNETT, D.C., P.A.

## Current Principal Place of Business:

820 NORTH S R 434  
UNIT A  
ALTAMONTE SPRINGS, FL 32714 US

## Current Mailing Address:

820 NORTH S R 434  
UNIT A  
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-2922971

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BENNETT, DAVID J.  
820 N SR 434  
STE A  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

195 WEKIVA SPRINGS ROAD  
SUITE 208  
LONGWOOD, FL 32779 US

## New Mailing Address:

195 WEKIVA SPRINGS ROAD  
SUITE 208  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

BENNETT, DAVID J.  
195 WEKIVA SPRINGS RD.  
SUITE 208  
LONGWOOD, FL 32779 US

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: DAVID BENNETT

04/23/2002

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: D ( ) Delete  
Name: BENNETT, DAVID J.,  
Address: 820 NORTH S R 434 UNIT A  
City-St-Zip: ALTAMONTE SPRINGS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BENNETT, DAVID J  
Address: P.O. BOX 1898  
City-St-Zip: MOUNT DORA, FL 32757 US

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: DAVID BENNETT

D

04/23/2002

Electronic Signature of Signing Officer or Director

Date