2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # K55878** THOMAS J. UMSTEAD, M.D., P.A.

Country

12.

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE NAME

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

STREET ADDRESS CITY-ST-ZIP

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

Name

Mailing Address

3. Mailing Address

City & State

6. Name and Address of Current Registered Agent

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

2101 TRINITY OAKS BLVD., SUITE 203

OFFICERS AND DIRECTORS

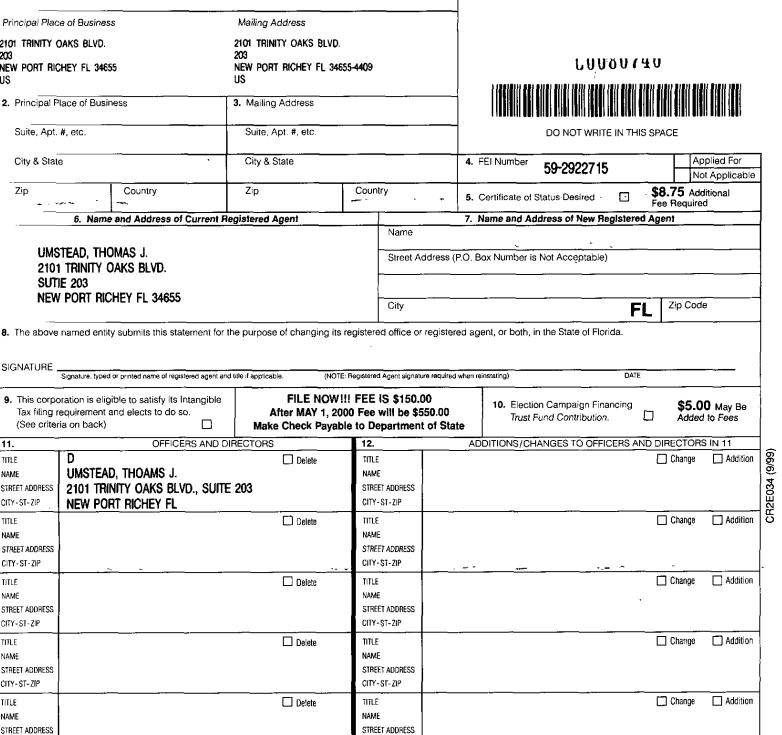
Suite, Apt. #, etc.

2101 TRINITY OAKS BLVD.

NEW PORT RICHEY FL 34655-4409

May 03, 2000 8:00 am Secretary of State

05-03-2000 90081 011 ***150.00



I hereby certify that the information supplied with this filling 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 coort as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with a raddress, with all they like empowered.

SIGNATURE: OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place of Business

2101 TRINITY OAKS BLVD.

NEW PORT RICHEY FL 34655

2. Principal Place of Business

UMSTEAD, THOMAS J.

SUTIE 203

(See criteria on back)

2101 TRINITY OAKS BLVD.

NEW PORT RICHEY FL 34655

9. This corporation is eligible to satisfy its Intangible

UMSTEAD, THOAMS J.

NEW PORT RICHEY FL

Tax filing requirement and elects to do so.

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

11.

TITI F

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

TITLE

TITLE NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS CITY-ST-7iP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZiP

CITY-ST-ZIP

Change

■ Addition