

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000008094

FILED  
Apr 17, 2002 8:00 AM  
Secretary of State

Entity Name: TAMPA BAY ALLIANCE, INC.

## Current Principal Place of Business:

6301 MEMORIAL HWY  
SUITE 102  
TAMPA, FL 33615

## New Principal Place of Business:

5111 MEMORIAL HWY  
SUITE 102  
TAMPA, FL 33634

## Current Mailing Address:

6301 MEMORIAL HWY  
SUITE 102  
TAMPA, FL 33615

## New Mailing Address:

5111 MEMORIAL HWY  
SUITE 102  
TAMPA, FL 33634

FEI Number: 59-3687023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EISENSTADT, DEBORAH CPA  
5111 MEMORIAL HWY  
SUITE 102  
TAMPA, FL 33634 US

## Name and Address of New Registered Agent:

EISENSTADT, DEBORAH CPA  
5111 MEMORIAL HWY  
SUITE 100  
TAMPA, FL 33634 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:

04/17/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DC ( ) Delete  
Name: MANDEL, IRA G MD  
Address: 6301 MEMORIAL HWY STE 102  
City-St-Zip: TAMPA, FL 33615

Title: DST ( ) Delete  
Name: SHEESLEY, PHILIP  
Address: 6301 MEMORIAL HWY STE 102  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: SMITH, ADAM  
Address: 401 E JACKSON STREET STE 2100  
City-St-Zip: TAMPA, FL 33601

Title: D ( ) Delete  
Name: ORBAN, BARBARA PHD  
Address: 13201 BRUCE B DOWNS BLVD MDC 56  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: RUGG, ELIZABETH  
Address: 9800 4TH ST N STE 206  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: FREEDMAN, STEVE PHD  
Address: 5700 SW 34TH STREET, STE. 323  
City-St-Zip: GAINSVILLE, FL 33608

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRA G. MANDEL

DP

04/17/2002

Electronic Signature of Signing Officer or Director

Date

JEFF HOCHBERG -D  
33920 U.S. HIGHWAY 19 N., STE 285  
PALM HARBOR, FL 34684

ROBERT FINDORFF -D  
14306 KELLINGREW PLACE  
TAMPA, FL 33624

DOUGH HOLT, M.D. - D  
1105 E. KENNEDY BLVD.  
TAMPA, FL 33675