

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N00000008202**

1. Entity Name

MEDICAL ALLIANCE SOCIETY OF AMERICA INC.

Principal Place of Business

Mailing Address

**2000 PALM BEACH LAKES BLVD., SUITE 777
WEST PALM BEACH FL 33409****2000 PALM BEACH LAKES BLVD., SUITE 777
WEST PALM BEACH FL 33409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Fee Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Delete
NAME	AINSLEY, ALAN	
STREET ADDRESS	2000 PALM BEACH LAKES BLVD., #777	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Delete
NAME	BISHINS, LARRY V	
STREET ADDRESS	4548 N FEDERAL HIGHWAY	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Delete
NAME	POPICK, EDWARD R	
STREET ADDRESS	10201 SHEILA COURT	
CITY-ST-ZIP	WELLINGTON FL 33414	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-18-2002

54-683-5111

Date

Daytime Phone #

CR2E037 (9/01)

FILED
Apr 02, 2002 8:00 am
Secretary of State

02-28-2002 90031 011 ****61.25

20407



DO NOT WRITE IN THIS SPACE

Attachment
20407

**MEDICAL ALLIANCE SOCIETY
OF AMERICA INC.**

**2000 Palm Beach Lakes Blvd.
Suite 777
West Palm Beach, Florida 33409**

#N000000005202

March 14, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2002 Uniform Business Report


Dear Sir or Madam:

The enclosed form, referenced above, was returned to us for a missing Federal Employment Identification Number.

Please be advise the form is being returned to you without an FEI, because we have not obtained one as of this date. The future of this Corporation has not been fully determined and because of this we have not requested an FEI Number from the Internal Revenue Service. We do however, wish to keep the Corporation current with the State of Florida and this is the reason for filing the 2002 UBR. As soon as the course of the Corporation has been determined we will apply for an FEI and will submit it to you. In the meantime we are requesting that the 2002 UBR be accepted as filed so that we can remain current.

Thank you for your assistance. Please let us know if you have any questions.

Sincerely,


Franklin C. Woods
Accounting Department