2001 UNIFORM BUSINESS REPORT (UBR)

02-13-2001 90571 018 ****70.00
N16538

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # N16538

1. Entity Name

AVMED, INC.

Principal Place of Business	Mailing Address
9400 SOUTH DADELAND BLVD. MIAMI FL 33156	4300 NW 89TH BLVD GAINESVILLE FL 32606 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2742907 ☐ 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
DE MONTMOLLIN, STEPHEN J 4300 NW 89TH BLVD GAINESVILLE FL 32606	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW: FEE IS $61.25	9. 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P PEDDIE, EDWARD C 4300 NW 89 BLVD GAINESVILLE FL 32606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVC GOODE, R R 4300 NW 89 BLVD GAINESVILLE FL 32606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WILLIASMON, II G ED 4300 NW 89 BLVD GAINESVILLE FL 32606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Williamson, II., G. Ed 4300 NW 89 Blvd. Gainesville, FL 32606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS DEFORD, M.D. J 4300 NW 89 BLVD GAINESVILLE FL 32606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LS	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MUSTIAN, M. T. 4300 NW 89 BLVD GAINESVILLE FL 32606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEIVA, MARIA C 4300 NW 89 BLVD GAINESVILLE FL 32606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVCT Leiva, Maria Camila 4300 NW 89 Blvd. Gainesville, FL 32606	☒ Change ☐ Addition

CR2E037 (10/00)

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: Leslie C Rankin 1/17/01 (352) 337-8706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 8/14/2002

N16538

AvMed, Inc.
Corporation #N16538
(Addendum to 2001 Corporation Annual Filing)

	D – Delete	Anderson, M.D., Richard,4300 NW 89 Blvd., Gainesville, FL 32606
	D – Delete	Butler, Scottie, 4300 NW 89 Blvd., Gainesville, FL 32606
	D - Delete	Carr, Ph.D., Glenna, 4300 NW 89 Blvd., Gainesville, FL 32606
D	D – Add	Davis, Pamela Jo, 4300 NW 89 Blvd., Gainesville, FL 32606
	D - Delete	Dotson, Albert, 4300 NW 89 Blvd., Gainesville, FL 32606
D|C	DC	Dunlap, Joe G., 4300 NW 89 Blvd., Gainesville, FL 32606
	D – Delete	Fletcher, George, 4300 NW 89 Blvd., Gainesville, FL 32606
D	D	Floyd, H. Jackson, 4300 NW 89 Blvd., Gainesville, FL 32606
D|P	P - Add	Hudson, Robert C., 4300 NW 89 Blvd., Gainesville, FL 32606
	AS – Delete	Hughey, Philip Jan, 4300 NW 89 Blvd., Gainesville, FL 32606
	DVC&T	Leiva, Maria Camila, 4300 NW 89 Blvd., Gainesville, FL 32606
D	D	Ludden, M.D., John, 4300 NW 89 Blvd., Gainesville, FL 32606
	D - Delete	Mustian, M.T., 4300 NW 89 Blvd., Gainesville, FL 32606
	D - Delete	Natiello, PhD., Thomas, 4300 NW 89 Blvd., Gainesville, FL 32606
	P – Delete	Peddie, Edward C., 4300 NW 89 Blvd., Gainesville, FL 32606
D	D	Perry, M.D., Bruce, 4300 NW 89 Blvd., Gainesville, FL 32606
AS	AS	Rankin, Les, 4300 NW 89 Blvd., Gainesville, FL 32606
	D – Delete	Rossi, Richard, 4300 NW 89 Blvd., Gainesville, FL 32606
AT	AT – Add	Still, Ken 4300 NW 89 Blvd., Gainesville, FL 32606
	D - Delete	Stringfellow, Sr., James, 4300 NW 89 Blvd., Gainesville, FL 32606
D	D	Tyson, Bernard, 4300 NW 89 Blvd., Gainesville, FL 32606
D	D	York, PhD., E.T., 4300 NW 89 Blvd., Gainesville, FL 32606