

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

08-04-2002 90165 008 \*\*\*150.00

**DOCUMENT # P00000039742**

1. Entity Name  
**BRIAN EDENS, P.A.**

Principal Place of Business  
**8378 MARKET ST.**  
**BRADENTON FL 34202**

Mailing Address  
**8378 MARKET ST.**  
**BRADENTON FL 34202**

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 **65-1010896**

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

**EDENS, BRIAN**  
**8378 MARKET ST.**  
**BRADENTON FL 34202**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
NAME **EDENS, BRIAN P.A.**  
STREET ADDRESS **8378 MARKET ST.**  
CITY-ST-ZIP **BRADENTON FL 34202**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

**7/30/02**  
Date

**941 907 9663**  
Daytime Phone #

CR2E034 (4/02)

attachment  
#PO0000039742 972293

SPINE AND SPORT AT LAKEWOOD RANCH  
8378 MARKET STREET  
BRADENTON, FLORIDA 34202  
941-907-9663

Division of Corporations  
Uniform Business Reports Filings  
PO Box 1500  
Tallahassee, Fl. 32302-1500

Re: Brian Edens P.A.  
FEI # 65-1010896

To Whom It May Concern:

I am writing this letter to inform the Div. of Corp's that for some unknown reason our UBR's were never received by your division. The original UBR's were sent on time, back in mid April. It was not known that the UBR's were not received until just this month. I have enclosed a check for \$150.00. The original checks that were sent in April were never cashed or deposited (checked with the bank).

Thank You,

Brian Edens P.A.

B. Edens P.A.