2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   P00000084431

1. Entity Name

WTS AND EDIS HEALTH CARE ASSOCIATES INC

FILED

02 AUG 28   AM 8: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
728 GROVE PLACE	728 GROVE PLACE
TOWN OF ORCHID	TOWN OF ORCHID
VERO BEACH FL 32963	VERO BEACH FL 32963

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Zip	Country	Zip	Country	4. FEI Number **65-1047894**	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
SEED, WILLIAM T MD	Name
728 GROVE PLACE	Street Address (P.O. Box Number is Not Acceptable)
TOWN OF ORCHID	
VERO BEACH FL 32963	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

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 $150.00
After May 1, 2002 Fee will be $550.00
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** NAME SEED, WILLIAM T STREET ADDRESS 728 GROVE PLACE CITY-ST-ZIP VERO BEACH FL 32963		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 50000753445--9 -08/30/02--01055--021 ****150.00 ****150.00	
TITLE **D** NAME SMITH, ELIZABETH D STREET ADDRESS 728 GROVE PLACE CITY-ST-ZIP VERO BEACH FL 32963		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	

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 _____   7/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

Attachment

P000000S443 /

Bonnie J. Kansler
Certified Public Accountant
24 Woodlee Road
Cold Spring Harbor, NY 11724

August 17, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Gentlemen:

Enclosed please find my client's UBR and check for $150. which have been sitting in
my pile of unfiled,unattended-to work. My excuse is simply that I have been dealing with
huge medical problems of my daughter and much has gotten away from me.

I am aware of the possible penalty for this late filing and wish to ask you leniency this
time as the penalty will naturally fall to me as the accountant, and there was no intent on
my part to let this be tardy. My client did the right thing.

I would appreciate any consideration you can give me regarding this. It will not happen
again.

Thank you,

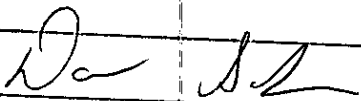Bonnie J. Kansler
Certified Public Accountant

Attachment

#P000010358l

To Whom it may Concern,

We are a new corporation working on a very small scale. My husband, who usually handles the paperwork for the corporation was hospitalized. After opening the uniform business report, I realized that we did not file on time. I called the number on the report and was told to file the $150.00 fee with an explanation of what happened. We would greatly appreciate any grace in the matter!

Thank you,

Dawn Schauman