


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 29, 2003 8:00 am**  
**Secretary of State**

05-29-2003 90139 003 \*\*\*150.00

DOCUMENT # <b>POD000012892</b>	
1. Entity Name <b>GEORGE SCHULZ, PhD and ASSOCIATES, P.A.</b>	

**DO NOT WRITE IN THIS SPACE**

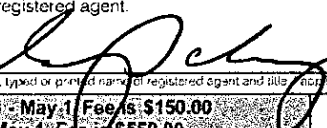
**80122798**

2. Principal Place of Business <b>5738 CANTON COVE</b>		3. Mailing Address Suite, Apt. #, etc.	
City & State <b>WINTER SPRING FL</b>		City & State <b>F.</b>	
Zip <b>32708</b>	Country <b>US.</b>	Zip	Country
4. FEI Number <b>59-3687938</b>		Applied For No: Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

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<b>DO NOT WRITE IN THIS SPACE</b>	7. Name and Address of Current Registered Agent	
	Name <b>GEORGE SCHULZ</b>	
	Street Address (P.O. Box Number is Not Acceptable) <b>5738 CANTON COVE</b>	
	Suite, Apt. #, etc. <b>SUITE 110</b>	
City <b>WINTER SP</b>		FL
Zip		<b>32708</b>

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, of the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **5/1/03**

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>PRESIDENT GEORGE SCHULZ 5738 CANTON COVE SUITE 110 WINTER SP FL 32708</b>	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all of or like empowered.

SIGNATURE:  **GEORGE SCHULZ 5/1/03 407 641 3664**

CR2E034B (12/02)