2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

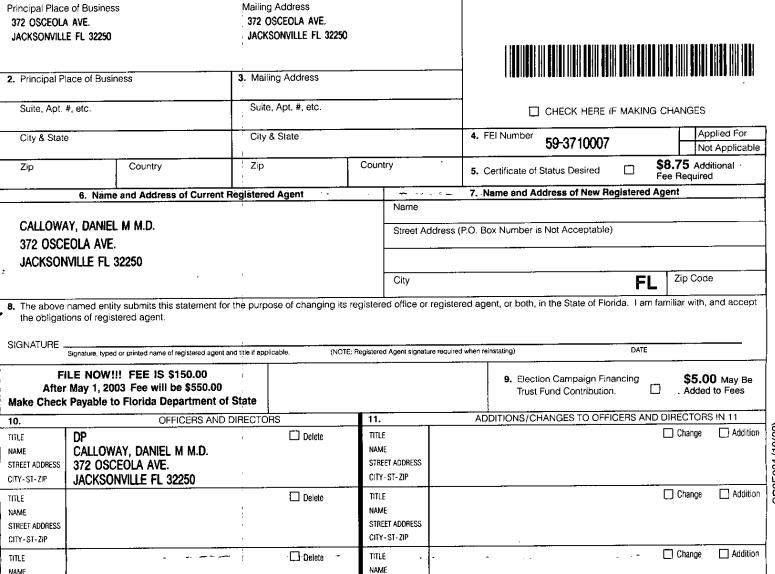
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DANIEL M. CALLOWAY, M.D., P.A.



Mar 06, 2003 8:00 am & Secretary of State **FILED**

03-06-2003 90094 031 ***150.00



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

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12. I hereby certify that the information supplied with this filling 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 Block 11 if changed, or on an attachment wi

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

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CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

Daytime Phone #

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