


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

FILED

03 JUN -6 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000039916
1. Entity Name
BARBARA H. GURR, P.A.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
974 CHARLOTTE ST
Suite, Apt. #, etc.

3. Mailing Address
974 CHARLOTTE ST
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
LONGWOOD, FL

City & State
LONGWOOD, FL

4. FEI Number 59-3712807

Applied For
 Not Applicable

Zip 32750-6373 Country SEMINOLE

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5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name BARBARA H. GURR

Street Address (P.O. Box Number is Not Acceptable)
974 CHARLOTTE ST

City LONGWOOD FL Zip Code 32750-6373

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  BARBARA H. GURR 2/11/2003

(NOTE: Registered Agent signature required when resigning)

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. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Barbara H. Gurr 974 Charlotte St Longwood, FL 32750-6373	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)(f), 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 other like empowered.

SIGNATURE:  BARBARA H. GURR 2/11/03 407-331-1092

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

CR2E034B (12/02)

gwg