2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2002 8:00 am
Secretary of State
06-03-2002 91193 005 ***150.00

DOCUMENT # P01000046984

1. Entity Name
MEDICAL SERVICES OF SARASOTA, INC.

Principal Place of Business	Mailing Address
3355 CLARK RD. SUITE 103 SARASOTA FL 34231	~~3355 CLARK RD. SUITE 103~~ ~~SARASOTA FL 34231~~

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	2381 FRUITVILLE ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: SARASOTA, FL
Zip / Country	Zip: 34237 / Country: USA

4. FEI Number: 65-1133929 ☐ 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
BALL, CHARLES H 1444 FIRST ST SARASOTA FL 34236	Name: MICHAEL R. PENDER, JR Street Address (P.O. Box Number is Not Acceptable): 2381 FRUITVILLE ROAD City: SARASOTA FL Zip Code: 34237

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] 4/10/02
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 NAME STREET ADDRESS CITY-ST-ZIP	D HORVAT, BRANIMIR L 3355 CLARK RD, SUITE 103 SARASOTA FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT 1234 SEA PLUME WAY SARASOTA, FL 34242	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORVAT, NEVENKA 3355 CLARK RD, SUITE 103 SARASOTA FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S 1234 SEA PLUME WAY SARASOTA, FL 34242	☒ Change ☐ Addition
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CR2E034 (9/01)

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] [illegible] APR 1 0 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #