2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000052477

Entity Name: TIMOTHY M. TALBOTT, D.D.S., M.S., P.A.

Current Principal Place of Business:

3675 N COUNRTRY CLUB DR PH 4
AVENTURA, FL 33180

New Principal Place of Business:

3467 PINE RIDGE ROAD
SUITE 103
NAPLES, FL 34109 US

Current Mailing Address:

3675 N COUNRTRY CLUB DR PH 4
AVENTURA, FL 33180

New Mailing Address:

3467 PINE RIDGE ROAD
SUITE 103
NAPLES, FL 34109

FEI Number: 65-1108724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TALBOTT, TIMOHTY M
3675 N COUNRTRY CLUB DR PH 4
AVENTURA, FL 33180

Name and Address of New Registered Agent:

TALBOTT, TIMOHTY M
3467 PINE RIDGE ROAD
SUITE 103
NAPLES, FL 34109

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: 04/30/2002
Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TALBOTT, TIMOHTY M
Address: 3675 N COUNRTRY CLUB DR PH 4
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: TALBOTT, TIMOHTY M
Address: 3467 PINE RIDGE ROAD SUITE 103
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY TALBOTT DR 04/30/2002
Electronic Signature of Signing Officer or Director — Date