

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90096 009 ***150.00

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DOCUMENT # P01000054381

1. Entity Name
PRACTICE DEVELOPMENT, INC.



Principal Place of Business
**1075 HIBISCUS LANE
DELRAY BEACH FL 33444**

Mailing Address
**1075 HIBISCUS LANE
DELRAY BEACH FL 33444**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1108944**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **Current**

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**GARBER, STEPHEN
1075 HIBISCUS LANE
DELRAY BEACH FL 33444**

7. Name and Address of New Registered Agent

Name **Stephen Garber**
Street Address (P.O. Box Number is Not Acceptable)
78 NE 5th Ave
City **Delray Beach** **FL** Zip Code **33483**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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 **PD**
NAME **GARBER, STEPHEN** ☐ Delete
STREET ADDRESS **1075 HIBISCUS LANE**
CITY-ST-ZIP **DELRAY BEACH FL 33444**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **Stephen Garber** ☒ Change ☐ Addition
STREET ADDRESS **78 NE 5th Ave** } **change of**
CITY-ST-ZIP **Delray Beach, FL 33483** } **address**

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

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

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

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

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAY

Daytime Phone #

CR2E034 (4/03)

ATTACHMENT
Practice Development, Inc.
Profit Through Human Potential

#P01000054381
80140742

August 15, 2003

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box
Tallahassee, FL 32302-1500

Re: People Development Incorporated # P95000058016
Practice Development #p01000054381

Dear Sirs;

I moved earlier this year and did not receive the 2003 renewal form for a for profit corporation that were mailed to my last address. Therefore I was unaware of the filing deadline. I am enclosing the forms that I have just received along with the yearly fee of \$150 for each corporation and ask that you will please remove the penalty.

Thank you for your assistance with this matter.

Sincerely,


Stephen Garber