

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000086831

1. Entity Name  
ECS IN-PATIENT SERVICES, INC.Principal Place of Business  
1001 IVES DAIRY ROAD STE 206  
NORTH MIAMI FL 33179Mailing Address  
1001 IVES DAIRY ROAD STE 206  
NORTH MIAMI FL 33179FILED  
Jun 13, 2002 8:00 am  
Secretary of State

05-08-2002 90137 047 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt., #, etc.

Suite, Apt., #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-1129901

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SCHILLINGER, JEFFREY  
1001 IVES DAIRY ROAD STE 206  
NORTH MIAMI FL 33179

7. Name and Address of New Registered Agent

Name

~~CT Corporation System~~

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

~~1200 South Pine Island Road~~

City

~~Plantation~~

FL

Zip Code

~~33324~~

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, 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

TITLE VTD  
NAME Schillinger, Jeffrey  
STREET ADDRESS 1001 Ives Dairy Road  
CITY-ST-ZIP North Miami, FL 33179 ☐ DeleteTITLE PSD  
NAME Schillinger, David  
STREET ADDRESS 1001 Ives Dairy Road #206  
CITY-ST-ZIP North Miami, FL 33179 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 of Schillinger, Jeffrey  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)



*Attachment 35319*  
**ECS HOLDINGS, INC.**

1001 Ives Dairy Road, Suite 206  
North Miami, FL 33179  
(305) 944-9990 / (305) 947-9990 fax  
(800) 222-2443

June 7, 2002

Division of Corporations  
Florida Department of State  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Enclosed please find the following 2002 Uniform Business Reports which were returned to us due to the new registered agent not having accepted designation. We have determined at this time to continue the services of the current registered agents and, therefore, have deleted the change of registered agent information. Kindly process these forms as revised.

<u>CORPORATION</u>	<u>REF. NO.</u>
ECS In-Patient Services, Inc.	P01000086831
ECS ER Physician Management, Inc..	P01000052525
Emergency Care Specialists of Texas, P.A.	F99000005215
ECS of Louisiana, a Professional Medical Corporation.	F99000005214

Please advise us if there are any further issues concerning the filing of these reports. Thank you for your assistance and cooperation.

Sincerely,

*Nancy K. Watkin*

Nancy K. Watkin  
Corporate Counsel

encl as stated