2003 FOR PROFIT CORPORATION

DOCUMENT # P02000004490 SUE E. GOERGE MD, PA. GEORGE SUE Piniqual Place of Business Sine BERMINLE ID MILTON F. 2570 MILTON F. 2570 MILTON F. 2570 MILTON F. 2570 Sulfa, Agit, it etc. Sulfa, Agi	UNIFORM BUSINESS REPORT (UBR)					
Size BERRYHLL RD MILTON FL 32570 Size Apt. #, etc. City & State Application of Statis in Debits of City & State Application of Statis in Debits of City & State Application of Statis in Debits of City & State Application of State in Debits of City & State Application of City & State State Application of Application of Application of City & State Application of Appl	SUE E. GOERGE, M.D., P.A.					
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6. Name and Address of Current Registered Agent GEORGE, SUE E Street Address (P.O. Box Number is Not Acceptable) City City FL Zip Code 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 Fonde. I am familier with, and accept the obligations of registered agent, or both, in the State of Fonde. I am familier with, and accept the obligations of registered agent. SIGNATURE SIGNATURE Signature, upost or presen name of registered agent and their septicles. OFFICE Registered office or registered depent. SIGNATURE Signature, upost or presen name of registered agent and their septicles. OFFICE Registered office or registered depent depent with and accept the obligations of registered agent. SIGNATURE Signature, upost or presen name of registered agent and their septicles. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS IN 11 TILE OFFICERS AND DIRECTORS IN 11	City & State		City & State		4. FEN Number Applied For Not Applicable	
GEORGE, SUE E S978 BERRYHILL RD MILTON FL 32570 City FL Zp Code City FL Zp Code 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, and on a registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, and on a registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida Defendence of Plants and Addition of Plants and	Zip	Country	Zip	Country		
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Size Address (P.O. Box Number is Not Acceptable) Size Address (P.O. Box Number is Not Acceptable)	GENRGE	SHEE	and the second s	Name		
All TON FL 32570 City FL Zip Code 8. The above named only submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the collegations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State 10.				Street Addres	s (P.O. Box Number is Not Acceptable)	
City FL Zip Code						
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature				City	Tip Code	
SIGNATURE Signatura (present agent and the # applicable. (NOTE Registered Apen signatura required when relinatoric) DATE	FL Zip Code					
Signature reported to private capent and riley if applicables (PAPPER signature) STEET						
FILE NOW!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY-ST-2P TITLE STREET ADDRESS CITY-ST-2P T	SIGNATURE					
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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)(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:

Sue E. George

Signature and typed on Painted Name of Signature of Director of Director of Director of 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 and typed on Painted Name of Signature and Typed on Painted Name of Signature and Director of Director of the corporation of the corporat