## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

**SUITE 1014** 

909 MAR WALT DRIVE

## P02000033254 **DOCUMENT #**

1. Entity Name

**SUITE 1014** 

Principal Place of Business

909 MAR WALT DRIVE

MARK E. SCHROEDER, M.D., P.A.



FileD 38 Feb 07, 2003 8:00 am 8 Secretary of State 92-07-2003 90004 557 8 **FILED** 

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Suite. Apr. 4, clic.  Suite, Apr. 4, clic.	FORT WALTON BEACH FL 32547		FORT WALTON BEACH FL 32547				
City & State  Ci	2. Principal Place of Business		3. Mailing Address				
Zip Country Zip Country S. Certificate of Status Desired Agent Agent Desired Agent Agent Desired Desired Agent Desired D	Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
S. Certificato of Status Desired   Survey Appendix   Survey Appendix   Survey Andrews   Sur	City & State		City & State				
POSTER, WILLIAM S 909 MAR WALT DRIVE SUITE: 1014 FORT WALTON BEACH FL 32547 City FL Zip Code  6. Singapove named antity submits this statement for the purpose of changing its registered defect or registered agent, or both. In the State of Florida. I am familiar with, and accept drive engineers agent and the fragilitation.  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTIONS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 11  WILL MAKE 1014 STREET ADDRESS  1014 STREET ADDRESS  1014 STREET ADDRESS  1015 STREET	Zip —.	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  City FL Zip Code  Street Address (PO. Box Number is Not Acceptable)  FLE TOT WALTON BEACH FL 32547  FL	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered	Agent	
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City FL Ztp Code	i				Name		
SUTE 1014  FORT WALTON BEACH FL 32547  City FL Zip Code  1. Steadpower animed 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 ediligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  1. ADDITIONS/GHANGES TO OFFICERS AND DIRECTORS  11. ADDITIONS/GHANGES TO OFFICERS AND DIRECTORS IN 11  FILE  STREET ADDRESS  CITY 51-2P  TILE  NAME  STREET ADDRESS  CITY 51-2P	•			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
## City   FL   Zip Code	13.133						
8. Election Campaign Financing State   Delete State   Delete Street Audress   City-51-2P   Change   Addition   Addition   Change   Addition   Change   Addition   City-51-2P   Change   Change   Addition   City-51-2P   Change   Change   Change   Addition   City-51-2P   Change   C	SUITE_1014						
SIGNATURE    Title NOW!!! FEE IS \$150.00   After May 1, 2003 Fee will be \$550.00   Addition Name State Flagges   Addition Name   Addition Name State Flagges   Addition Name   Addition Name State Flagges   Addition Name   Addition Name State Flagges   Addit	FORT WALTON BEACH FL 32547				<b>┌</b> ┗		
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After May 1, 2003 Fee will be \$550.00 May Be Added to Fees     9. Election Campaign Financing		Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered Agent signature re-	quired when reinstating) DATE		
TITLE MAME MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP	After May 1, 2003 Fee will be \$550.00				· · · · · · · · · · · · · · · · · · ·	\$5.00 May Be Added to Fees	
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		ertify that the information supplied with	this filing does not qualify to		Section 119 07/3/(i) Florida Statutas 14 attac	tifu that the information	

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, Flurities 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: 🖊