

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000060822

FILED
Apr 08, 2003
Secretary of State

Entity Name: LINDA MAYNARD, M.D., P.A.

Current Principal Place of Business:

1400 FLORIDA MOSS LANE
PORT ORANGE, FL 32128

New Principal Place of Business:

5239 Highbury Circle
Sarasota, FL 34238

Current Mailing Address:

3400 S. TAMiami TRAIL
SUITE 202
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 04-3679236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUZIER, THOMAS B ESQ.
3400 S. TAMiami TRAIL
SUITE 202
SARASOTA, FL 34239

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAYNARD, LINDA M.D.
Address: 1400 FLORIDA MOSS LANE
City-St-Zip: PORT ORANGE, FL 32128

Title: VP,S () Delete
Name: MAYNARD, STEVEN
Address: 1400 FLORIDA MOSS LANE
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAYNARD, LINDA M.D.
Address: 5239 Highbury Circle
City-St-Zip: SARASOTA, FL 34238

Title: VP,S (X) Change () Addition
Name: MAYNARD, STEVEN
Address: 5239 Highbury Circle
City-St-Zip: SARASOTA, FL 34238

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: LINDA MAYNARD

P

04/08/2003

Electronic Signature of Signing Officer or Director

Date