

FILED

03 JUN 11 PM 12:45

TALLAHASSEE, FLORIDA

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P02000079443**1. Entity Name
KAREN V. HOUGH, A.R.N.P., M.S.N., P.A.Principal Place of Business
**14980 113TH AVENUE NORTH
LARGO, FL 33774**Mailing Address
**14980 113TH AVENUE NORTH
LARGO, FL 33774****600020777786**
06/11/03--01046--010 **150.00☐ CHECK HERE IF MAKING CHANGES

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

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HOUGH, KAREN V
14980 113TH AVENUE NORTH
LARGO, FL 33774**

7. Name and Address of New Registered Agent

Name

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

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 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 submitting)

DATE

9. Election Campaign Financing
Trust Fund Contribution.☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PD
HOUGH, KAREN V
14980 113TH AVENUE NORTH
LARGO, FL 33774**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ DeleteTITLE
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CITY-STATE-ZIP☐ DeleteTITLE
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CITY-STATE-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionTITLE
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CITY-STATE-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-STATE-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 fee empowered.

SIGNATURE:

Karen V. Hough
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

5/27/03

127-593-7303

Date

Daytime Phone #

CR2E034 (10/02)

May 26, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Karen V. Hough, ARNP, MSN, PA

To Whom It May Concern:

My name is Karen Hough and I am writing this letter in explanation of why my 2003 for Profit Corporation fee is now late. I spoke to an employee of your office named Markita and questioned why I had received a letter pertaining to reference number P99000044487, which is enclosed. I didn't understand why you were not accepting my payment of the 150.00 yearly fee. She explained to me that I turned in the Profit Corporation Uniform Business Report for my old Corporation called Mobile Medical Care.

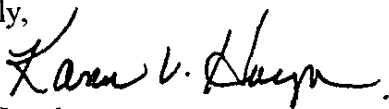
My tax attorney had originally filed for the new corporation, but had told me I was still doing business as Mobile Medical Care, so I was under the assumption that I was doing business as "Mobile Medical Care" and therefore that is why I turned in the enclosed form with a payment of \$150.00 for 2003. I never received a Profit Corporation Uniform Business Report for Karen V. Hough, ARNP, MSN, PA, so I had no idea I was sending in the wrong form.

Markita therefore told me how to download the correct form off the Internet and file this letter along with another 150.00 payment towards the appropriate corporation, Karen V. Hough, ARNP, MSN. **P.A.**

I have enclosed all the correspondence from your office in this letter. Please note that I never received any of my checks back. Markita informed me that the payments show credit to Mobile Medical Care, Inc. I'm not sure of the process, but Markita stated that I am due the money back. Please let me now if you are in need of anything else from me.

Thanking you in advance for your time and consideration.

Respectfully,



Karen V. Hough