

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000113161

FILED
Jul 03, 2003
Secretary of State

Entity Name: HARBOR MEDICAL CLINIC, P.A.

Current Principal Place of Business:

17506 BRIGHTON AVE
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

17506 BRIGHTON AVE
SUITE C
PORT CHARLOTTE, FL 33954

Current Mailing Address:

17506 BRIGHTON AVE
PORT CHARLOTTE, FL 33954

New Mailing Address:

17506 BRIGHTON AVE
SUITE C
PORT CHARLOTTE, FL 33954

FEI Number: 37-1445841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERNARD-ILIOU, CLAUDE
17506 BRIGHTON AVE
PORT CHARLOTTE, FL 33954

Name and Address of New Registered Agent:

ILIOU, CLAUDE-BERNARD MD
17506 BRIGHTON AVE
SUITE C
PORT CHARLOTTE, FL 33954

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: CLAUDE-BERNARD ILIOU

07/03/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BERNARD ILIOU, CLAUDE
Address: 17506 BRIGHTON AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ILIOU, CLAUDE-BERNARD MD
Address: 17506 BRIGHTON AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

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: CLAUDE-BERNARD ILIOU, MD

PTSD

07/03/2003

Electronic Signature of Signing Officer or Director

Date