2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000014124

WESTERN COMMUNITIES FAMILY PRACTICE ASSOCIATES,

Principal Place of Business									
570 ROYAL PALM BEACH BLVI ROYAL PALM BEACH FL 33411									

Mailing Address

US «C1 F. 3 570 ROYAL PALM BEACH BLVD ROYAL PALM BEACH FL 33411

2. Principal Place of Bu	siness	3. Mailing Address Suite, Apt. #, etc.				
Suite, Apt. #, etc.						
City & State		City & State				
Zip	Country	Zip	Country			

FILED May 03, 2001 8:00 am Secretary of State

05-03-2001 91031 001 ***600.00



2. Principal F	Principal Place of Business 3. Mailing Address				THE THE THE THE PERSON HAVE BEEN REAL FROM SOME FROM THE PERSON HAVE BEEN BEEN BEEN BEEN BEEN BEEN BEEN BE			
Suite, Apt. #, etc. City & State City & State		DO NOT WRITE IN THIS SPACE						
		City & State			4. FEI Number 65-0397979		Applied For Not Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 A	Additional	
	6. Name and Address of Current R	egistered Agent		7.	Name and Address of New Register	ed Agent		
			Name					
KLEIN, STUART B ESQ 1551 FORUM PLACE SUITE 400B WEST PALM BEACH FL 33401			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
			City			Zip C	ode	
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent signature rec			TE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE After MAY 1, 2001 Fee Make Check Payable to D		01 Fee will be \$550.0		Election Campaign Financing Trust Fund Contribution.		.00 May Be led to Fees		
11.	OFFICERS AND D	IRECTORS	12.	ΑE	DITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISHOP, JEFFREY M 10131 FOREST HILL BLVD., #150 WEST PALM BEACH FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	e	
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of the cor	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower on an attachment with an address with the contract of t	/ered√to execute this /e bort :	the exemption stated in by signature shall have t as required by Chapter	Section he same, 607-Fori	119.07(3)(i), Elorida Statutes. I further ideal gritot as I made under oath; the ga Statutes; and that my name appea	certify that the at I am an offic ars in Block 11	information er or director or Block 12 if	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED N