FILED
Apr 03, 2002 8:00 am
Secretary of State
04-03-2002 90501 032 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000023832

1. Entity Name

LAWRENCE P. BEMIS P.A.

DO NOT WRITE IN THIS SPACE

B0058754

2. Principal Place of Business	3. Mailing Address
112 FRONT ST.	C/O TOPEL FORMAN
Suite, Apt. #, etc.	Suite, Apt. #, etc. 676 N. ST. CLAIR STE 2200
City & State KEY WEST FL	City & State CHICAGO IL
Zip ~~33156~~ 33040 Country	Zip 60611 Country

DO NOT WRITE IN THIS SPACE

4. FE Number 64-0401137 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name LAWRENCE P. BEMIS

Street Address (P.O. Box Number is Not Acceptable) 112 FRONT ST

City KEY WEST FL Zip Code ~~33156~~ 33040

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.

SIGNATURE Lawrence P. Bemis March 27, 2002

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	P/V/T/S	TITLE	
NAME	LAWRENCE P. BEMIS	NAME	
STREET ADDRESS	112 FRONT ST	STREET ADDRESS	
CITY-ST-ZIP	KEY WEST, FL ~~33156~~ 33040	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Lawrence P. Bemis March 27, 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034B (12/01)