

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000093796

Entity Name  
PROMEDCO OF SOUTHWEST FLORIDA, INC.

FILED  
Apr 17, 2000 8:00 am  
Secretary of State  
04-17-2000 90080 005 \*\*\*150.00

Principal Place of Business  
97TH ST N  
FL 34102

Mailing Address  
801 CHERRY ST.  
SUITE 1450  
FORT WORTH TX 76102-6814  
US

C0062436



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

4. FEI Number 75-2701686  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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

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

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

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

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

PD POSEY, H. WAYNE 801 CHERRY STREET, SUITE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP EDWARDS, DALE K 801 CHERRY STREET, SUITE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VPS JOHNSON, DEBORAH A. 801 CHERRY ST STE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VPT SMITH, ROBERT D 801 CHERRY STREET, SUITE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP MC QUEARY, CHARLES 801 CHERRY STREET, SUITE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ASAT HALL, TOM 801 CHERRY STREET, SUITE 1450 FORT WORTH TX 76102 Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (817) 335-5035  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)