

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2001 8:00 am
Secretary of State

07-02-2001 90002 026 ***550.00

C0072269

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000065524

1. Entity Name
North Central Florida Independent Practitioners Association, Inc.

Principal Place of Business
2831-F NW 41st St
Gainesville, FL 32606

Mailing Address
% Emily Hoon, Ph.D.
2531-C NW 41st St.
Gainesville, FL 32606

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3237952

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Kevin I. Downey, Attorney at Law
2631 NW 41st St, Suite A-2
Gainesville, FL 32606

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE \$350.00
After MAY 1, 2001 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PS</u> <u>David Kuniansky, Esq.</u> <u>2630 NW 41st St, Ste D3</u> <u>Gainesville, FL 32606</u>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Bonnie Baker Ph.D.</u> <u>2831 NW 41st St Ste F</u> <u>Gainesville, FL 32606</u>	<input type="checkbox"/> Change <input type="checkbox"/> Addition <u>Same</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Gilda Josephson, Ph.D.</u> <u>2831 NW 41st St Ste F</u> <u>Gainesville, FL 32606</u>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Emily Franch Hoon, Ph.D.</u> <u>2531 NW 41st St, Bldg C</u> <u>Gainesville, FL 32606</u>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: Emily Franch Hoon Ph.D. Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/27/01 (352) 375-4666

Date

Daytime Phone #

CR2E034 (11/00)

Attachment Doc # P95000065524

C0078269

North Central Florida Independent Practitioners Association

2831 NW 41st St Ste F

Gainesville, FL 32606

June 27, 2001

Uniform Business Report

Division of Corporations

PO Box 1500

Tallahassee, FL 32302-1500

To whom it may concern,

Our corporation apparently did not receive a notice to file this year. I am now the new treasurer. I had to check with our attorney, Kevin Downey, regarding status of our organization. When he told us we were way past the filing deadline, I was amazed.

Therefore, enclosed please find a check for \$550.00 to cover our filing and late fees and a list of our current officers and directors. If you have any questions, please call me at (352) 375-4666.

Sincerely,

Emily Franck Hoon, Ph.D.

Emily Franck Hoon, Ph.D.

Clinical Psychologist