2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
04-10-2001 90068 005 ***150.00

DOCUMENT # P95000096576

1. Entity Name
CLINICAL RESEARCH SPECIALISTS, INC.

Principal Place of Business	Mailing Address
313 ESPLANADE S VENICE FL 34285 US	46 N. WASHINGTON BLVD. #1 SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
770 S. PALM AVE.	
Suite, Apt. #, etc. #203	Suite, Apt. #, etc.
City & State SARASOTA, FLORIDA	City & State
Zip 34236 / Country	Zip / Country

4. FEI Number 59-3348822 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PATTERSON, JOHN 46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236	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 _____ DATE
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) ☐

FILE NOW!!! FEE IS $150.00
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	DP MCENTEE, WILLIAM J 313 THE ESPLANADE SO VENICE FL 34285	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	XX Change 770 S. PALM AVE., #203 SARASOTA, FLORIDA 34236	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP SANDY, CYNTHIA S 313 THE ESPLANADE SO VENICE FL 34285	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	XX Change 770 S. PALM AVE., #203 SARASOTA, FLORIDA 34236	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MCENTEE, DIANNE D 313 THE ESPLANADE SO VENICE FL 34285	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	XX Change 770 S. PALM AVE., #203 SARASOTA, FLORIDA 34236	☐ Addition
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CR2E034 (10/00)

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: _____ (941) 342-8288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

WILLIAM J. McENTEE, III, President