

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000074185

FILED
Apr 14, 2002 8:00 AM
Secretary of State

Entity Name: JOHN MICHAEL CARLSON, P.A.

Current Principal Place of Business:

5155 PALM DR
MELBOURNE, FL 32951 US

New Principal Place of Business:

1031 NW 6TH STREET
SUITE B-1
GAINESVILLE, FL 32601 US

Current Mailing Address:

5155 PALM DR
MELBOURNE, FL 32951 US

New Mailing Address:

1031 NW 6TH STREET
SUITE B-1
GAINESVILLE, FL 32601 US

FEI Number: 59-3403165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSON, JOHN MICHAEL
5155 PALM DR
MELBOURNE, FL 32951 US

Name and Address of New Registered Agent:

CARLSON, JOHN MICHAEL
1031 NW 6TH STREET
SUITE B-1
GAINESVILLE, FL 32601 US

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: _____

Electronic Signature of Registered Agent

04/14/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARLSON, JOHN MICHAEL
Address: 5155 PALM DR
City-St-Zip: MELBOURNE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARLSON, JOHN MICHAEL
Address: 1031 NW 6TH STREET, SUITE B-1
City-St-Zip: GAINESVILLE, FL 32601 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MICHAEL CARLSON

PD

04/14/2002

Electronic Signature of Signing Officer or Director

Date