

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90206 018 ***150.00

0084625

DOCUMENT # P96000104578

1. Entity Name

BAKER MEDICAL ASSOCIATES, P.A.

Principal Place of Business

Mailing Address

8005 BAY ST
STE. 3
SEBASTIAN FL 32963
US

8005 BAY ST
STE. 3
SEBASTIAN FL 32963
US

2. Principal Place of Business

3. Mailing Address

787 37th St
Suite, Apt. #, etc.
E 140

787 37th St
Suite, Apt. #, etc.
E 140

City & State
Vero Beach FL

City & State
Vero Beach FL

Zip
32960

Country
USA

Zip
32960

Country
USA

4. FEI Number 65-0714478

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

MOORE, JOHN E
756 BEACHLAND BLVD
VERO BEACH FL 32963

Name
John E. Moore

Street Address (P.O. Box Number is Not Acceptable)
3070 N. Highway A1A
Suite 200

City
Vero Beach

FL Zip Code
32963

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 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
D
BAKER, SETH H
109 RIVER OAK DR
VERO BEACH FL 32963 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2320 Club Dr
Vero Beach FL 32963

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BAKER, MARY S
109 RIVER OAK DRIVE
VERO BEACH FL 32963 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
2320 Club Dr
Vero Beach FL 32963

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: Seth H. Baker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4-6-01 Daytime Phone # _____

CR2E034 (10/00)