

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90151 050 ***150.00

DOCUMENT # P97000069404

1. Entity Name

MARK B. NORSTEIN, M.D., P.A.

Principal Place of Business

**1100 62ND AVENUE SOUTH
ST. PETERSBURG FL 33705**

Mailing Address

**1100 62ND AVENUE SOUTH
ST. PETERSBURG FL 33705**

AVUU7701



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3461148**

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

7. Name and Address of New Registered Agent

**NORSTEIN, MARK B
1100 62ND AVENUE SOUTH
ST. PETERSBURG FL 33705**

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 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
**PS
NORSTEIN, MARK B
1100 62ND AVENUE SOUTH
ST. PETERSBURG FL 33705** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
MITCHELL, GREGORY
4951 34TH ST S
ST PETE FL 33711** ☐ Delete
*MITCHELL, GREGORY
(NOTE SPELLING)*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PRAWER, JOEL
4951 34TH ST S
ST PETE FL 33711** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**FINLEY, ROY
1100 62ND AVE S.
ST. PETERSBURG, FL 33705** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**OLDENSKI, RICHARD
4951 34TH ST. SOUTH
ST. PETERSBURG, FL 33711** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARK B NORSTEIN

1/7/01

727.866.3166

CR2E034 (10/00)