

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90162 013 ***150.00

DOCUMENT # P97000073551

1. Entity Name

A & W MEDICAL SERVICES INCORPORATED

Principal Place of Business

11043 180TH CT SOUTH
BOCA RATON FL 33498

Mailing Address

11043 180TH CT SOUTH
BOCA RATON FL 33498

2. Principal Place of Business

47 Long Meadow Pl. ←

3. Mailing Address

Same 47 Long Meadow Pl.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Rotonda West FL ←

City & State

Rotonda West

4. FEI Number

65-0769613

Applied For

Not Applicable

Zip

33947

Country

Charlotte ←

Zip

33947

Country

Charlotte

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARTZ, HENRY R
11043 180TH CT SOUTH
BOCA RATON FL 33498

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

47 Long Meadow Pl

City

Rotonda West

FL

Zip Code

33947

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

Henry R. Artz

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/17/02

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, 2002 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

TITLE VPT ☐ Delete

NAME ARTZ, S K
STREET ADDRESS 11043 150 CTS
CITY-ST-ZIP BOCA RATON FL 33498

TITLE PS ☐ Delete

NAME ARTZ, H R
STREET ADDRESS 11043 180TH CT S
CITY-ST-ZIP BOCA RATON FL 33488

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 47 Long Meadow Pl
CITY-ST-ZIP Rotonda West FL 33947

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 47 Long Meadow Pl
CITY-ST-ZIP Rotonda West FL 33947

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Suzanne K. Artz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Suzanne K. Artz

1/17/02

941-697-5591

Date

Daytime Phone #

CR2E034 (9/01)