DOCUMENT # P9800005811  1. Entity Name  BRANTLEY KENT MOLPUS, M.D., P.A.						Mar 30, 2000 8:00 am Secretary of State 03-30-2000 90057 019 ***150.00			
Principal Place of Business	N	Mailing Address							
1177 N. PARK AVENUE WINTER PARK FL 32789	S	00 S. ORANGE AVE. TE 2300 RLANDO FL 32801-3455				1851(8 <b>2</b> 1	C0048	432	1188) 1181 1881
2. Principal Place of Business 1420 Semeet Or	<del> </del>	20 Sunset Drive			DO NOT WRITE IN THIS SPACE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.					DO NOT WRIT	E IN THIS SPACE	
City & Plate Ark FL		With Pak FL		4.	FEI Numbe	59-3493316	, ,	pplied For lot Applicable	
32789 _ Country		Zip C 32789	Count	<b>A</b>			of Status Desired	S8.75 Ac Fee Requir	
6. Name and Address	of Current Regi	stered Agent		Ness		Name and	Address of New Re	egistered Agent	
100.00			Į	Name <b>B</b> (x		K. M			
A.G.C., CO. 200 S. ORANGE AVE. STE 2300			-	Street Ad	idress (P.O. B	Box Numbe	r is Not Acceptable)		
ORLANDO FL 32801			ŀ	City.	nter A	ECK		FL Zpc	<b>6</b> 4 ·
8. The above named entity submits this	statement for the	purpose of changing its	registere	d office or	registered ag	gent, or both	h, in the State of Flor	rida.	
SIGNATURE			!! FEE ! 00 Fee \	Agent signatures   Agent signatu	re required when r	10. Ele	OLECTOR  ction Campaign Fina st Fund Contribution	DATE \$5.	00 May Be
	ICERS AND DIRE		12.			J DDITIONS/I	CHANGES TO OFFI	CERS AND DIRECTO	3S IN 11
TITLE D MOLPUS, BRANTLEY STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32	K VENUE	☐ Delete	TITLE NAME STREE		1430	S US,BR	ANTLEY K FDrive FL 32784	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	<u> </u>	☐ Delete	TITLE NAME STREE			<u>*                                    </u>		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE		*			☐ Change	Addition
				ST-ZIP					[
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY- TITLE NAME STREE		!			☐ Change	☐ Addition

2000 UNIFORM BUSINESS REPORT (UBR)

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:

645 2353