

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90004 046 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

656254

DOCUMENT #
 1. Entity Name **P98000013319**
SCOTT W. BECK, M.D., P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
593492752

Applied For	Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

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 _____ (NOTE: Registered Agent signature required when reappointing)
Signature, typed or printed name of registered agent and title if applicable. DATE

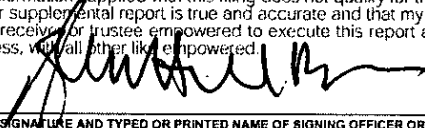
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	BECK, SCOTT W. 4701 COCONUT PALM CIRCLE NE ST. PETERSBURG, FL 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, and all other like empowered.

SIGNATURE:  **4/23/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Florida Department of State, Division of Corporations

656254

Corporations Online

www.sunbiz.org

Public Inquiry

Florida Profit

SCOTT W. BECK, M.D., P.A.

PRINCIPAL ADDRESS

880 6TH ST S, STE 310
ST PETERSBURG FL 33701

MAILING ADDRESS

880 6TH ST S, STE 310
ST PETERSBURG FL 33701

Document Number
P98000013319

FEI Number
593492752

Date Filed
02/09/1998

State
FL

Status
ACTIVE

Effective Date
02/02/1998

Registered Agent

Name & Address
BECK, SCOTT W DR. 880 6TH ST S, STE 310 ST PETERSBURG FL 33701

Officer/Director Detail

Name & Address	Title
BECK, SCOTT W 4701 COCONUT PALM CIR NE ST PETERSBURG FL 33703	D

Annual Reports

Report Year	Filed Date	Intangible Tax
1999	04/05/1999	
2000	03/22/2000	
2001	04/17/2001	