

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

0007368
 AV

DOCUMENT # P98000023478

1. Entity Name

TOBY CROWTHERS CRNA, P.A.

03-14-2002 90016 037 ***150.00

Principal Place of Business

**1266 FISH HOOK WAY
 PONTE VEDRA BEACH FL 32082**

Mailing Address

**1266 FISH HOOK WAY
 PONTE VEDRA BEACH FL 32082**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

156 Woodlands Creek Dr

3. Mailing Address

156 Woodlands Creek Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ponte Vedra Beach, FL

City & State

Ponte Vedra Beach, FL

4. FEI Number

59-3506541

Applied For

Not Applicable

Zip
32082

Country

Zip
32082

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

CROWTHERS, WILL R

1266 FISH HOOK WAY

PONTE VEDRA BEACH FL 32082

Name

Growthers, Will R.

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

156 Woodlands Creek Drive

City

Ponte Vedra Beach

FL

Zip Code

32082

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **CROWTHERS, WILL R**
 STREET ADDRESS **1266 FISH HOOK WAY**
 CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **D** ☒ Change ☐ Addition
 NAME **Crowthers, Will R.**
 STREET ADDRESS **156 Woodlands Creek Drive**
 CITY-ST-ZIP **Ponte Vedra Beach FL 32082**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-4-02

904-285-3471

CR2E034 (9/01)