

2001 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
Feb 20, 2001 8:00 am
Secretary of State

01-26-2001 90161 043 ****50.00
 02-20-2001 90043 036 ****108.75

DOCUMENT # P98000038440

1. Entity Name

STEPHEN P. BELCHER, D.D.S., P.A.

Principal Place of Business

Mailing Address

**8951 BONITA BEACH ROAD
 BONITA SPRINGS FL 34135**

**8951 BONITA BEACH ROAD
 BONITA SPRINGS FL 34135**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0837233

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELCHER, STEPHEN P
 8951 BONITA BEACH ROAD
 BONITA SPRINGS FL 34135**

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 **D** ☐ Delete
 NAME **BELCHER, STEPHEN P**
 STREET ADDRESS **8951 BONITA BEACH ROAD**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

☒ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 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, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/2001 941-947-4222
 Date Daytime Phone #

CR2E034 (10/00)



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

January 31, 2001

STEPHEN P. BELCHER, D.D.S., P.A.
8951 BONITA BEACH ROAD
SUITE 110
BONITA SPRINGS, FL 34135

Subject: ~~STEPHEN P. BELCHER, D.D.S., P.A.~~

Reference Number: **P98000038440**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$100.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/DB
ANNUAL REPORTS SECTION