

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90261 014 ***150.00

DOCUMENT # P98000054113

1. Entity Name
CATHERINE DROURR, M.D., P.A.

Principal Place of Business
1210 JUPITER LAKES BOULEVARD
SUITE 205, BUILDING 4000
JUPITER FL 33458

Mailing Address
1210 JUPITER LAKES BOULEVARD
SUITE 205, BUILDING 4000
JUPITER FL 33458



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
210 Jupiter Lakes Blvd.
 Suite, Apt. #, etc.
Suite 206 Bld 4000
 City & State
Jupiter FL.
 Zip
33458 Country
USA

3. Mailing Address
210 Jupiter Lakes Blvd
 Suite, Apt. #, etc.
Suite 206 Bld 4000
 City & State
Jupiter FL
 Zip
33458 Country
USA

4. FEI Number **65-0849517** Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
DROURR, CATHERINE
1210 JUPITER LAKES BOULEVARD
SUITE 205, BUILDING 4000
JUPITER FL 33458

7. Name and Address of New Registered Agent
 Name **Drourr, Catherine**
 Street Address (P.O. Box Number is Not Acceptable)
210 Jupiter Lakes Blvd.
Suite 206 Building 4000
 City **Jupiter** FL Zip Code **33458**

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 **2/28/02**
 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST DROURR, CATHERINE MD 1210 JUPITER LAKES BLVD BLD 4000 JUPITER FL 33458 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST Catherine Drourr 210 Jupiter Lakes Blvd Suite 206 Bld 4000 Jupiter FL 33458 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE 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, with all other like empowered.

SIGNATURE: **2/28/02** **561-743-2239**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)