

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90183 038 ***150.00

DOCUMENT # P98000067438

1. Entity Name
EDGE MEDICAL LEGAL CONSULTING, INC.

Principal Place of Business

**6909 DREWRY'S BLUFF
BRADENTON FL 34203**

Mailing Address

**6909 DREWRY'S BLUFF
BRADENTON FL 34203**

2. Principal Place of Business

9815 DISCOVERY TERRACE

Suite, Apt. #, etc.

3. Mailing Address

9815 DISCOVERY TERRACE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BRADENTON FL

City & State

BRADENTON FL

4. FEI Number **65-0851175**

Applied For

Not Applicable

Zip

34203

Country

MAVATCO

Zip

34203

Country

MAVATCO

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

6. Name and Address of Current Registered Agent

**CLARK, KAREN
6909 DREWRY'S BLUFF
BRADENTON FL 34203**

7. Name and Address of New Registered Agent

Name

KAREN CLARK

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

9815 DISCOVERY TERRACE

City

BRADENTON

FL

Zip Code

34203

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 **Karen Clark**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/24/01

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

TITLE **D** ☐ Delete
NAME **CLARK, CRAIG**
STREET ADDRESS **6909 DREWRY'S BLUFF**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **P** ☐ Delete
NAME **CLARK, KAREN**
STREET ADDRESS **6909 DREWRY'S BLUFF**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME **CRAIG CLARK**
STREET ADDRESS **9815 DISCOVERY TERRACE**
CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **PRES.** ☒ Change ☐ Addition
NAME **KAREN CLARK**
STREET ADDRESS **9815 DISCOVERY TERRACE**
CITY-ST-ZIP **BRADENTON, FL 34203**

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

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

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STREET ADDRESS
CITY-ST-ZIP

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: **Karen Clark** **KAREN CLARK**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/01
Date

941-704-5270
Daytime Phone #

CR2E034 (10/00)