2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000097896

DOCUMENT # 1. Entity Name

BANE MEDICAL SERVICES, INC.

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May 14, 2003 8:00 am Secretary of State

05-14-2003 90142 046 ***150.00

Principal Place of Business -2009-AIRPORT-RD		Mailing Address 2009-AIRPORT-RS			i.				
-PLANT-CITY-E	1, 33567.	PLANT -CITY-FL 23567-					I F askide r kee haisk hødin oskil ook ee selke og	11 0 (11 11) 1 005 1 (1111)	1 (1) (4) 1 (1) (1) (1)
2. Principal Place of Business 607 South Alexander St. 607 South Alexander			1eva	evander St				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Suite, Apt.		Suite, Apt. #, etc.				C OUTOR HERE IS MAKING CHANGES			
						CHECK HERE IF MAKING CHANGES			
Plant (rida		4. F	FEI Number 59-3544113		Applied For Not Applicable
Zip 33563	Country U.S.	Zip 33563	try		5. Certificate of Status Desired \$8.75 Additional Fee Required				
33303	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
DANE OD	FOODY ALAN			Name Gregory Alan Bane					
•	EGORY ALAN					(P.O. Box Number is Not Acceptable)			
2009 AIRP									
PLANT CIT	TY FL 33567					th Alexander Street			
į.				Plan	it C	ity	F	FL │ ^{Zi} 333°	563
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere					m familiar with	i, and accept
Nature .	Der San	_ GI	REGO	RY AI	AN 3	BAN	ie 4/2	5/03	,
	Signature, typed or printed name of egistered agent ar	d title if applicable. (NOTE	: Registered	d Agent signatu	re required	when rei	instating) DAT	E	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State				-	Election Campaign Financing Trust Fund Contribution.		00 May Be ed to Fees
10.	OFFICERS AND D	DIRECTORS	11.			ADI	DITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 11
TITLE	P/D	☐ Delete	TITLE		P/S			X Change	Addition
NAME STREET ADDRESS	BANE, BEN W 3213 POLO PLACE		NAME	ET ADDRESS			Ben W. Polo Place		
	PLANT CITY FL 33567			-ST-ZIP			City, Florida 33	566	
TITLE	STD	□ Delete	TITLE		V			X Change	Addition
NAME	BANE, GREGORY ALAN		NAME	· I	Bane	e,	Gregory Alan Crestfield Drive		
STREET ADDRESS CITY-ST-ZIP	2625 CRESTFIELD DRIVE VALRICO FL 33594			ET ADDRESS -ST-ZIP			co, Florida 33594		
TITLE	D_~~	- Delete	TITLE		V	<u> </u>		. Change	Addition
NAME	BANE, JIMMY DAVID	C.2 541010	NAME	1	Ban	e,	Jimmy David		
	3102 JAP TUCKER ROAD			ET ADDRESS			Jap Tucker Road		
CITY-ST-ZIP	PLANT CITY FL 33565			ST-ZIP	Pla	nt	City, Florida 33		
TITLE NAME		☐ Delete	TITLE					☐ Change	☐ Addition
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	:		CITY-	ST-ZIP		_			
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS			NAME	T ADDRESS					1
CITY-ST-ZIP				ST-ZIP					1
TITLE		☐ Delete	TITLE			_		☐ Change	Addition
NAME			NAME						}
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP					
	ertify that the information supplied with t	his filing does not qualify for			ed in Ser	ction 1	119 07(3)(i) Florida Statutes I further	certify that the	information
indicated of the core	on this report or supplemental report is to poration or the receiver or trustee empor or on an attachment with an address, wi	rue and accurate and that merend to execute this report a	ıy signat	ure shall ha	ive the s	ame le	egal effect as if made under oath; tha	t I am an office	er or director

(813)707-6869

SIGNATURE: