

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State

07-12-2001 90003 005 ***150.00

DOCUMENT # P98000106330

1. Entity Name

PAUL W. BIVENS, D.D.S., P.A.

Principal Place of Business

Mailing Address

**1614 HUNTINGTON PLACE
 SAFETY HARBOR FL 34695**

**1614 HUNTINGTON PLACE
 SAFETY HARBOR FL 34695**

2. Principal Place of Business

300 ALTERNATE 19 N

3. Mailing Address

300 ALTERNATE 19 N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM HARBOR, FLORIDA

City & State

PALM HARBOR, FLORIDA

Zip

34683

Country

PINELLAS

Zip

34683

Country

PINELLAS

4. FEI Number

59-1979847

Approved For

Not Applicable

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

BIVENS, PAUL W

**1614 HUNTINGTON PLACE
 SAFETY HARBOR FL 34695**

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

PAUL W BIVENS

[Signature]

4-15-01

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST BIVENS, PAUL W 1614 HUNTINGTON PLACE SAFETY HARBOR FL 34695	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIVENS, PAUL W 1614 HUNTINGTON PLACE SAFETY HARBOR FL 34695	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]

4-15-01

727 743 5756

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DW-

Page 1 of 1

CH06034 110.00

Attachment
D# P9800010000
AW76747

July 5, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Uniform Business Report Dated April 14, 2001
Paul W. Bivens, D.D.S., P.A.

Dear Sir:

On April 14, 2001 my Uniform Business Report was mailed to your office. A check for \$150.00 was enclosed. To this date, this check has not cleared my bank. Your office has verified that this form has not been received. I can only assume that the check and the report were lost in the mail. I am therefore, sending a copy of the form along with a new check for \$150.00. I am sending the check by overnight, certified mail to ensure that you do receive these papers. Since the original form was sent in a timely fashion and was lost, and am enclosing a check for \$150.00.

Sincerely,



Paul W. Bivens, D.D.S., M.S.D.