

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000031105

1. Entity Name

MEDICAL OFFICE RESOURCES, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90052 048 ***150.00

Principal Place of Business

Mailing Address

8125 HAMPSHIRE DRIVE
 SEBRING FL 33870

8125 HAMPSHIRE DRIVE
 SEBRING FL 33870-6206

2. Principal Place of Business

101 GLEN MAR CIRCLE

3. Mailing Address

101 GLEN MAR CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SEBRING FL

City & State

SEBRING FL

4. FEI Number

65-0910299

Applied For

Not Applicable

Zip

33870

Country

Zip

33870

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SMALL, MARTHA
 8125 HAMPSHIRE DRIVE
 SEBRING FL 33870

7. Name and Address of New Registered Agent

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.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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 Delete
 NAME SMALL, MARTHA
 STREET ADDRESS 8125 HAMPSHIRE DRIVE
 CITY-ST-ZIP SEBRING FL 33870

TITLE Delete
 NAME SMALL, JAMES M
 STREET ADDRESS 8125 HAMPSHIRE DRIVE
 CITY-ST-ZIP SEBRING FL 33870

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DIRECTOR Change Addition
 NAME SMALL MARTHA
 STREET ADDRESS 101 GLEN MAR CIRCLE
 CITY-ST-ZIP SEBRING FL 33870

TITLE DIRECTOR Change Addition
 NAME SMALL JAMES M.
 STREET ADDRESS 101 GLEN MAR CIRCLE
 CITY-ST-ZIP SEBRING FL 33870

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: *Martha G. Small* **Martha G. Small** 2-21-00 863-655-9648
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)