

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000034501

1. Entity Name

BART PRICE, M.D., P.A.

FILED

May 18, 2000 8:00 am
Secretary of State

05-18-2000 90387 003 ***150.00

Principal Place of Business

1515 RINGLING BLVD SUITE 580
SARASOTA FL 34236

Mailing Address

1515 RINGLING BLVD SUITE 580
SARASOTA FL 34236-6720

2. Principal Place of Business

2800 S. Tamiami Tr

3. Mailing Address

2800 S. Tamiami Tr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, FL 34239

City & State

Sarasota, Florida

4. FEI Number

650916100

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

YANCHEK, JOHN A
1515 RINGLING BLVD SUITE 580
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name James P. Woodford

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

2800 S. Tamiami Trail

City Sarasota

FL

Zip Code 34239

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 date if applicable

James P. Woodford

(NOTE: Registered Agent signature required when reinstating)

4/28/00

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, 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 DP
NAME PRICE, BART ☐ Delete
STREET ADDRESS 1515 RINGLING BLVD SUITE 580
CITY-ST-ZIP SARASOTA FL 34236

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition
NAME PRICE, BART
STREET ADDRESS 2800 S. Tamiami Tr
CITY-ST-ZIP Sarasota FL 34239

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/00

Date

941-365-7771

Daytime Phone #

CR2E034 (9/99)