

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000073683**

1. Entity Name

Lawrence E Smith DO PA



**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90024 009 \*\*\*150.00

A0079142

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1120 Fairview Lane  
Singer Island, FL 33312

2. Principal Place of Business

1120 Fairview Lane

Suite, Apt. #, etc.

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Singer Island FL

City & State

4. FEI Number

05-0941366

Applied For

Not Applicable

Zip

33312

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

Lawrence E Smith  
1120 Fairview Lane  
Singer Island, FL 33312

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

Lawrence E Smith DO PA 9/13/00

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.  
(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 NAME STREET ADDRESS CITY-ST-ZIP	PIV/TIS Lawrence E Smith 1120 Fairview Lane Singer Island, FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
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

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:

Lawrence E Smith DO PA 9/13/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

Attachment # P99000073683

# Kelly & Kelly

Certified Public Accountants, P.A.

A0079142

MEMBERS OF AMERICAN AND FLORIDA INSTITUTES OF CERTIFIED PUBLIC ACCOUNTANTS

JOHN F. KELLY, C.P.A.  
ELIZABETH M. KELLY, C.P.A.

FT. LAUDERDALE (954) 581-0557  
PALM BEACH (561) 388-0557  
FAX (954) 581-2749

PLAZA 3000, SUITE 11 B  
3020 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FLORIDA 33306

August 8, 2000

Secretary of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

Ref: Lawrence E Smith DO PA

Dear Sirs:

Enclosed is check for \$150.00 for the 2000 Uniform Business Report for the above referenced corporation along with a completed report. Please be advised that this corporation never received the first request for this filing fee. If you have any questions, please contact the undersigned at 954-561-0557. Thank you.

Sincerely,



Elizabeth M Kelly CPA