## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT # :

P99000076884

1. Entity Name

ECS OF GEORGIA, INC.



**FILED** May 01, 2003 8:00 am Secretary of State

05-01-2003 90127 043 \*\*\*150.00

ncipal Place of Business D WEST CYPRESS CREEK ROAD 06 ITE 450 LAUDERDALE FL 33309		Mailing Address C/O LEGAL DEP 2828 CROASDAIL DURHAM NC 277	rt Le drive				
Principal Place of Business		3. Mailing Address			T 1881/1880 1510 18110 18111 88111 88111 88111 88111 88111 18810 81101 18181 18111 8811 1881		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 65-0943507		Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired		5 Additional equired
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent		
OT OODDOO	ATION OVOTEM			Name			
JI CUKPUK	ATION SYSTEM		ŀ	Caract Address (D.C. Brushlumber in Not Appendix II)			

C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD **PLANTATION FL 33324** 

Street Address (P.O. Box Number is Not Acceptable)	7. Name and Address of New Registered Agent				
Street Address (P.O. Box Number is Not Acceptable)	Name				
	Street Addre	ss (P.O. Box Number is Not Ac	ceptable)		
0				·	
City 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. I am familiar with, and accept the obligations of registered agent.

FU.C.NOWHY FEE IC 6150 00

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

(NOTE: Registered Agent signature required when reinstating)

After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SCHILLINGER, JEFFREY 1001 IVES DAIRY ROAD # 206 MIAMI FL 33180	X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, CEO Change Maddition STEVEN M. SCOTT, M.D. 2828 CROASDAILE DR DURHAM, NC 27705		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD SCHILLINGER, DAVID 1001 IVES DAIRY ROAD # 206 MIAMI FL 33180	₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, CFO  JACK S. GREENMAN 2828 CROASDAILE DR DURHAM, NC 27705		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Change Addition WEGNER, ANITA S 2828 CROASDAILE DR DURHAM, NC 27705		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		

12. 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 10 or Block 11 if changed, or on an attachment w

GREENMAN, PRES

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