

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082855

1. Entity Name

BERNIER FAMILY PRACTICE AND ASSOCIATES, P.A.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90354 022 ***150.00

Principal Place of Business

2202 STATE AVENUE
SUITE 111
PANAMA CITY FL 32405

Mailing Address

2202 STATE AVENUE
SUITE 111
PANAMA CITY FL 32405

2. Principal Place of Business

750 Harrison Avenue

Suite, Apt. #, etc.

3. Mailing Address

750 Harrison Avenue

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Panama City FL 32401

City & State

Panama City FL

4. FEI Number

59-3601058

Applied For

Not Applicable

Zip

32401

Country

Zip

32401

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERNIER, ARACELIA
GULF COAST MEDICAL PLAZA
2202 STATE AVENUE, SUITE 111
PANAMA CITY FL 32405

7. Name and Address of New Registered Agent

Name

Bernier, Aracelia

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

750 Harrison Avenue

City

Panama City

FL

Zip Code

32401

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 Aracelia Bernier, CEO / Aracelia Bernier 4/22/01

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

(NOTE: Registered Agent's 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, 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

TITLE ☐ Delete
NAME D
STREET ADDRESS BERNIER, ARACELIA
CITY-STATE-ZIP 2202 STATE AVENUE, SUITE 111
PANAMA CITY FL 32405

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME CEO
STREET ADDRESS Bernier Aracelia
CITY-STATE-ZIP 750 Harrison Avenue
Panama City FL 32401

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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:

Aracelia Bernier / Aracelia Bernier 4/22/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850-875-0040

CR2E034 (10/00)