2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
04-30-2001 90066 035 ***150.00

DOCUMENT # P99000085572

1. Entity Name
KELLY A. SANGREGORY, M.D., P.A.

Principal Place of Business	Mailing Address
421 KINGSLEX AVE BLDG 400 SUITE 401 ORANGE PARK FL 32073 US	421 KINGSLEX AVE BLDG 400 SUITE 401 ORANGE PARK FL 32073 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
421 Kingsley Ave	421 Kingsley Ave
Suite, Apt. #, etc. Suite 401	Suite, Apt. #, etc. Suite 401
City & State Orange Park FL	City & State Orange Park FL
Zip 32073 Country USA	Zip 32073 Country USA

4. FEI Number **31-1670567** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANGREGORY, KELLY A
1717 COUNTY ROAD 220
APARTMENT 3108
ORANGE PARK FL 32073

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. (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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVT SANGREGORY, KELLY 1717 CR 220 #3108 ORANGE PARK FL 32073 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SANGREGORY, KELLY 1738 FIDDLER'S RIDGE DR. ORANGE PARK, FL. 32003 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SEGINA, DANIEL 1717 CR 220 #3108 ORANGE PARK FL 32073 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEGINA, DANIEL 1738 FIDDLER'S RIDGE DR. ORANGE PARK FL. 32003 ☒ 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
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: Kelly A SanGregory Kelly A SanGregory 4-23-01 904-264-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)