

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000088519

FILED
Apr 28, 2002 8:00 AM
Secretary of State

Entity Name: CLINICAL MONITORING SERVICES, INC.

Current Principal Place of Business:

1617 MAXIMILLIAN DRIVE
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

1617 MAXIMILIAN DRIVE
WESLEY CHAPEL, FL 33543 US

Current Mailing Address:

1617 MAXIMILLIAN DRIVE
WESLEY CHAPEL, FL 33543

New Mailing Address:

1617 MAXIMILIAN DRIVE
WESLEY CHAPEL, FL 33543 US

FEI Number: 59-3603942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANZERRA, SUSANNE C
1677 MAXIMILLION DRIVE
ZEPHYRHILLS, FL 33543 US

Name and Address of New Registered Agent:

PANZERA, SUSANNE C
1677 MAXIMILIAN DRIVE
WESLEY CHAPEL, FL 33543 US

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: SUSANNE C. PANZERA

04/28/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PANZERA, SUSANNE C
Address: 1617 MAXIMILLIAN DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PANZERA, SUSANNE C
Address: 1617 MAXIMILIAN DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSANNE C. PANZERA

PD

04/28/2002

Electronic Signature of Signing Officer or Director

Date