

# 2000 UNIFORM BUSINESS REPORT (UBR)

1-2

DOCUMENT #P99000094959

1. Entity Name

Bayview Medical Associates, P.A.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT 16 AM 11:33

000003441630--5  
-10/27/00--01015--024  
\*\*\*\*150.00 \*\*\*\*150.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
1950 Arlington Street  
Suite 119  
Sarasota, FL 34239

Mailing Address  
1950 Arlington Street  
Suite 119  
Sarasota, FL 34239

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0956031

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Coppola, Joseph P., D.O.  
1950 Arlington Street  
Suite 119  
Sarasota, FL 34239

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, 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 PD ☐ Delete  
NAME Joseph P. Coppola, D.O.  
STREET ADDRESS 1950 Arlington St., Suite 119  
CITY-ST-ZIP Sarasota, FL 34239

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR/1034 (9/99)

-2-

DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P. A.  
ATTORNEYS AND COUNSELORS AT LAW

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October 12, 2000

Florida Department of State  
Division of Corporation  
Post Office Box 6327  
Tallahassee, Florida 32314

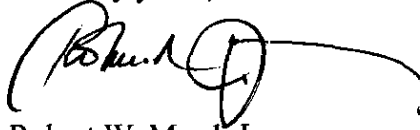
Re: Bayview Medical Associates, P.A.

Gentlemen:

Please find enclosed the **2000 Uniform Business Report** for the above corporation, which was administratively dissolved by your office on September 22, 2000 for failure to file the 2000 Report. Also enclosed is our firm **check for \$150.00** to cover the 2000 filing fee. Our client has advised us that the corporation did not receive the 2000 Uniform Business Report form or notification that the filing was due; accordingly, we are requesting that the reinstatement fee be waived.

Thank you for your consideration and assistance.

Sincerely yours,



Robert W. Mead, Jr.

RWM/no  
Enclosures

cc: Joseph P. Coppola, D.O.