2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000096199**

ROBERT P. SONDGERATH, C.R.N.A., P.A.

0 1 1 1 101-	(D -1	
Principal Plac	re of Business	

Mailing Address

3 Mailing Address

J BOX 3742

-- AUGUSTINE FL 32085-3742

PO BOX 3742

ST AUGUSTINE FL 32085-3742

FILED May 05, 2000 8:00 am Secretary of State

05-05-2000 90051 017 ***150.00



2. Principal Place of Business		3. Mailing Address				DO NOT WRITE IN THIS SPACE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_					
City & State		City & State	City & State		4. F	El Number 59-3607090		plied For t Applicable		
Zip		Country	Zip		Country		5. Certificate of Status Desired		.75 Additional Required——	
	6. Name	and Address of Current	Registered Agent			7. N	lame and Address of New Registered A	jent		
SONDGERATH, ROBERT P 320 OSCEOLA AVE JACKSONVILLE BEACH FL 32250				Name Street Address (P.O. Box Number is Not Acceptable)						
					City		FL	Zip Code	э	
SIGNATURE		submits this statement for			ed office or regi		ent, or both, in the State of Florida.			
Tax filing requirement and elects to do so. After MAY			NOW!!! FEE AY 1, 2000 Fee C Payable to D	will be \$550.0	State	10. Election Campaign Financing Trust Fund Contribution.	Added	O May Be to Fees		
11.		OFFICERS AND	DIRECTORS	12.		AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO BOX 3	NATH, ROBERT P 1742 N/A STINE FL 32085-3742	☐ Dele	NAM STRE				☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Dele	: NAM STRI	l l			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	pertify that the	e information supplied wit	□ Dele	NAN Stri City	E Et address -St-Zip	in Section	119.07(3)(i), Florida Statutes. I further cert	☐ Change	Addition	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P. Sondgenth 4-24-2000