

2003 FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107963

1. Entity Name
DR. LARRY BURCH INC.



FILED

04 FEB -5 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
~~1030 SOUTH STATE RD. 7~~
~~PLANTATION FL 33317~~

Mailing Address
~~1030 SOUTH STATE RD. 7~~
~~PLANTATION FL 33317~~

2. Principal Place of Business

3. Mailing Address

3267 W. Davie Blvd

3267 W. Davie Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Ft. Lauderdale FL

City & State
Ft. Lauderdale FL

4. FEI Number 65-0980278

Applied For
Not Applicable

Zip
33312

Country
USA

Zip
33312

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURCH, LAURENCE J

~~1030 SOUTH STATE RD. 7~~
~~PLANTATION FL 33317~~

Name

Street Address (P.O. Box Number is Not Acceptable)
3267 W. Davie Blvd

City
Ft. Lauderdale

FL

Zip Code
33312

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-27-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
BURCH, LAURENCE J
1030 S SR 7
FORT LAUDERDALE FL 33317 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
700028399947
02/09/04--01020--003 **150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BURCH, JANEANN
1030 S SR 7
FORT LAUDERDALE FL 33317 ☐ Delete

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

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FORT LAUDERDALE FL 33317 ☐ Delete

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1030 S SR 7
FORT LAUDERDALE FL 33317 ☐ Delete

TITLE
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☐ Change ☐ Addition

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☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-27-04 954-587-5700

CR2E034 (10/02)

0350472 AV