

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90056 044 ***150.00

0063283 AV

DOCUMENT # S22220

1. Entity Name

GAINESVILLE FAMILY PHYSICIANS, P.A.

Principal Place of Business

**2731 NW 41ST STREET
 SUITE A-2
 GAINESVILLE FL 32606**

Mailing Address

**2731 NW 41ST STREET
 SUITE B-2
 GAINESVILLE FL 32606**

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

59-3042421

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**MEDLEY, E. SCOTT
 2731 NW 41ST STREET
 SUITE A-2
 GAINESVILLE FL 32606**

7. Name and Address of New Registered Agent

Name
George M. Benchimol
 Street Address (P.O. Box Number is Not Acceptable)
2731-NW 41st Street A-2
 City
Gainesville FL Zip Code
32606

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. ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 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	D	Delete
NAME	MEDLEY, E. SCOTT	
STREET ADDRESS	2731 NW 41ST ST., #A-2	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	Delete
NAME	CARMICHAEL, PATRICK R.	
STREET ADDRESS	2731 NW 41ST ST., #A-2	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	Delete
NAME	BENCHIMOL, GEORGE M.	
STREET ADDRESS	2731 NW 41ST ST., #A-2	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	Delete
NAME	LEYTEM, MD B	
STREET ADDRESS	2731 N.W. 41ST ST. # A-2	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	Delete
NAME	BERK, JAMES W	
STREET ADDRESS	2731 NW 41ST ST	
CITY-ST-ZIP	GAINESVILLE FL 32606	
TITLE	D	Delete
NAME	LAUZARDO, EILEEN F	
STREET ADDRESS	2731 NW 41ST ST	
CITY-ST-ZIP	GAINESVILLE FL 32606	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director	Change	Addition
NAME	David A. Thompson		
STREET ADDRESS	2731 NW 41st St., #A-2		
CITY-ST-ZIP	Gainesville, FL		
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
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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/02
 Date

Daytime Phone #

CR2E034 (9/01)