

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90196 018 ***150.00

DOCUMENT # V47542

1. Entity Name
STEVEN T. BATTON, D.O., P.A.

Principal Place of Business

910 3RD ST
 STE B
 NEPTUNE BEACH FL 32266
 US

Mailing Address

910 3RD ST
 STE B
 NEPTUNE BEACH FL 32266
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9140 Golfside Dr.
 Suite, Apt. #, etc.
 4S

3. Mailing Address

9802 Baymeadows Rd
 Suite, Apt. #, etc.
 PMB #131 Ste 12

City & State
 Jacksonville, FL

City & State
 Jacksonville, FL

4. FEI Number
 59-3133412

Applied For
 Not Applicable

Zip
 32256

Country

Zip
 32256

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARON L. BARTLETT PA
 615 HWY A1A
 STE 101
 PONTE VEDRA BEACH FL 32082

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. 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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
 NAME: D
 STREET ADDRESS: BATTON, STEVEN T. DO
 CITY-ST-ZIP: 719 SELVA LAKES CIRCLE ATLANTIC BEACH FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME: 9802 Baymeadows Ste 12
 STREET ADDRESS: PMB #131
 CITY-ST-ZIP: Jacksonville, FL 32256

TITLE
 NAME
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 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

STEVEN T. BATTON

8/5/02

904-996-2003

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

Y47542 9132R

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

August 05, 2002

To whom it may concern,


Because of the confusing address changes of the business and the temporary closure (December 31, 2001), I did not receive the first notice.

Please use the following address for all correspondence:

Steven T. Batton, D.O., P.A.
P.M.B. # 131
9802 Baymeadows Rd. Suite 12
Jacksonville, FL 32256

Enclosed check for \$150 filling fee (per frequently asked questions #8)

Sincerely



Steven T. Batton, D.O.