

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90148 035 ***150.00

DOCUMENT # V71895

1. Entity Name

BARBARA A. NITSCH, M.D., P.A.

Principal Place of Business

Mailing Address

2040 GREY MARE WAY
 WELLINGTON FL 33414
 US

2040 GREY MARE WAY
 WELLINGTON FL 33414-7629
 US

2. Principal Place of Business

3. Mailing Address

12575 MALLET CIRCLE

12575 MALLET CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WELLINGTON, FLA.

City & State

WELLINGTON, FLA.

4. FEI Number

65-0371806

Applied For

Not Applicable

Zip

33414

Country

USA.

Zip

33414

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

FRIEDMAN, ANDREW R.
5355 TOWN CENTER ROAD
SUITE 801
BOCA RATON FL

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D NITSCH-KASMAN, BARBARA A 2040 GREY MARE WAY WELLINGTON FL 33414	<input type="checkbox"/>	 NAME 12575 MALLET CIRCLE STREET ADDRESS WELLINGTON, FLA. 33414 CITY-ST-ZIP	<input checked="" type="checkbox"/>
PST NITSCH-KASMAN, BARBARA A 2040 GREY MARE WAY WELLINGTON FL 33414	<input type="checkbox"/>	 NAME 12575 MALLET CIRCLE STREET ADDRESS WELLINGTON, FLA. 33414 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
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	<input type="checkbox"/>		<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: Barbara Nitsch (BARBARA NITSCH) Date: Jan 25/2000 Daytime Phone #: 561-793-9220

CR2E034 (9/99)