

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90056 013 ****50.00

DOCUMENT # Z00508

1. Entity Name
ALOMA PROFESSIONAL ASSOCIATES, L.C.

Principal Place of Business 2056 ALOMA AVE. STE. #101 WINTER PARK FL 32792	Mailing Address 2056 ALOMA AVE. STE. #101 WINTER PARK FL 32792
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2221 Lee Road	3. Mailing Address 2221 Lee Road
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Suite, Apt. #, etc. Suite 22	Suite, Apt. #, etc. Suite 22
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City & State Winter Park, FL	City & State Winter Park, FL
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4. FEI Number 59-3101711	Applied For <input type="checkbox"/> Not Applicable
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Zip 32789	Country USA	Zip 32789	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PURKEY, WILLIAM W JR.
 2056 ALOMA AVE.
 SUITE 101
 WINTER PARK FL 32792**

Name BRYAN M. THOMAS
Street Address (P.O. Box Number is Not Acceptable) 2221 Lee Road, Suite 22
City Winter Park FL Zip Code 32789

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  **2.20.2002**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM MIRZA, IQBAL, MD <input type="checkbox"/> Delete 2056 ALOMA AVE., SUITE 101 WINTER PARK FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 109 Dardanelli Lane Los Gatos, CA 95032
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete MEM PURKEY, WILLIAM MD 2056 ALOMA AVE., SUITE 101 WINTER PARK FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Managing Member Bryan M. Thomas, Managing Member 2221 Lee Road, Suite 22 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete MEM MILLER, KEN MD 2056 ALOMA AVE., SUITE 101 WINTER PARK FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4098 Scarlet Iris Place Winter Park, FL 32792-9412
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete MEM GUSKIEWICZ, ROBERT MD 2056 ALOMA AVE., SUITE 101 WINTER PARK FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Member Earl W. Brockelsby 2221 Lee Road, Suite 22 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **BRYAN M. THOMAS, Managing Member** **2/20/02** **407-644-9319**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (9/01)