2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F45280

Entity Name: SHERWOOD A. WEISMAN, D.P.M., P.A.

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

LAKE HILL CENTER SUITE E
75 FOX RIDGE COURT
DEBARY, FL 327132701 US
LAKE HILL CENTER, SUITE E
75 FOX RIDGE COURT
DEBARY, FL 327132701 US

Current Mailing Address: New Mailing Address:

LAKE HILL CENTER, SUITE E
75 FOX RIDGE COURT
DEBARY, FL 327132701 US
LAKE HILL CENTER, SUITE E
75 FOX RIDGE COURT
DEBARY, FL 327132701 US

FEI Number: 59-2134065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEISMAN, SHERWOOD
514 BALSAWOOD CT.
ALTAMONTE SPRINGS, FL 32714 US

WEISMAN, SHERWOOD
514 BALSAWOOD CT.
ALTAMONTE SPRINGS, FL 327142304 US

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: 01/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: WEISMAN, SHERWOOD,
Address: 514 BALSAWOOD CT.

City-St-Zip: ALTAMONTE SPGS, FL

 Title:
 D
 () Delete

 Name:
 WEISMAN, SHERWOOD,

 Address:
 514 BALSAWOOD CT.

 City-St-Zip:
 ALTAMONTE SPGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition Name: WEISMAN, SHERWOOD,

Address: 514 BALSAWOOD COURT

City-St-Zip: ALTAMONTE SPRINGS, FL 327142304

Title: DR. (X) Change () Addition Name: WEISMAN. SHERWOOD.

Address: 514 BALSAWOOD CT.

City-St-Zip: ALTAMONTE SPRINGS, FL 327142304

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERWOOD A. WEISMAN, D.P.M. PRES 01/07/2009