2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 18, 2007 8:00 am Secretary of State 04-18-2007 90186 013 ***150.00

	AIIIVA				\sim	ocicia	IYUIDU	ııı
DOCUMENT # F91225 1. Entity Name JACK A. NORDEN, M.D., P.A.					04-18-2007 90186 013 ***150.00			
Principal Place	e of Rusiness	Mailing Address		l	4,0 0	-		
			-					
4473 N STATE RD 7 LAUDERDALE LAKES, FL 33319 4473 N STATE RD 7 LAUDERDALE LAKES, FL				q	1.1			
DOCKONEL	Camed, 12 30010	ISTODENDALE BAN	20,12 0001		1 1 5 5 1 (5 5 5 1 5 5	TEIRI HAYD WEIT MADI BIN	#/PII PIBII BIBII BIBII BIBII BIBI	15 R 11 15 P
2 Principal D	lace of Business - No P.O. Box #	3. Mailing Address			-			
z. risicipairi	ede di busiliess - No F.O. Dox #	3. Mailing Address				HILLI HAND AND HILLI	11811 11111 1 61811 11111 11131 1111	18 3 † 3 9
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01152007	Chg-P	CR2E034 (12/06)	~
City & State		City & State		4. FEI Numbe		} -	plied For	
Zip Country		Zìp	Coun	tn.	65-0168	3249		t Applicable
Zip		Zip	Cour	шу	5. Certificate of	of Status Desired	□ \$8.75 Add Fee Require	
	6. Name and Address of Curren	t Registered Agent			7. Name and	Address of New R	egistered Agent	
NORDEN, JACK A				Name				
4473 N STATE RD 7				Street Address (P.O. Box Number is Not Acceptable)				
FORTLAU	IDERDALE, FL 33319							
				City			FI Zip Cod	е
. The above named entity submits this statement for the purpose of changing its register.				d office or registe	ared agent or beth	in the State of Ele	•	200 2000
	lons of registered agent.	or the purpose of changing	ing its registere	ad office of registe	sied agent, or both	i, in the State of the	mua. Tantiansila wili,	and accept
SIGNATURE_								
A	Signature, typed or printed name of registered ager	t and title if applicable.	(NOTE: Registere	d Agent signature require	ed when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	9. Election Ca Trust Fund	ampaign Finar Contribution.		5.00 May Be ded to Fees			
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS/0	CHANGES TO OFF	ICERS AND DIRECTORS	3 IN 11
TITLE	D Delete		TITLE	E	☐ Change ☐ Additi			Addition
NAME	NORDEN, JACK A		NAM	ı				
STREET ADDRESS CITY-ST-ZIP	4473 N STATE RD 7	10	1	ET ADDRESS - ST - ZIP				
	LAUDERDALE LAKES, FL 333						Change	- Addition
TITLE NAME		☐ Delete	TITLE NAM				C change	☐ Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			City	-ST-ZIP				
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAM					
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP				
		□ p-1					Channo	- Addition
TITLE NAME		☐ Delete	TITLE	Y Y			☐ Change	Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			CITY	-ST-ZIP				
TITLE		☐ Delete	TITU	Ē			☐ Change	Addition
NAME			, NAM	Ε				
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				-ST-ZIP				F3
TITLE		☐ Delete]			☐ Change	Addition
NAME STREET ADDRESS			NAM STRE	EET ADDRESS				
CITY-ST-ZIP		/ 1	•	-ST-ZIP				
	L	th his filling does not gue			ed in Chapter 119	. Florida Statutes 1	further certify that the i	nformation
indicated of the cor	certify that the information supplied will lon this report or supplemental report rporation or the receiver or trustee em , or on an attachment with an address	strue and accurate and powered to execute this r	that my signa	iture shall have the ired by Chapter 60	e same legal effec 07, Florida Statute	t as if made under s; and that my nam	oath; that I am an officer e appears in Block 10 o	or director r Block 11 if
changed	, or on an attachment with an address	, with all other like empov	wered.	DA	101	-/-	97///	