

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035648

FILED
Apr 30, 2009
Secretary of State

Entity Name: ZANNIS FAMILY MEDICAL CENTER, INC.

Current Principal Place of Business:

1500 N UNIVERSITY DR
112
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

11904 MIRAMAR PKWY
MIRAMAR, FL 33029

New Mailing Address:

17913 NW 7TH STREET
103
PEMBROKE PINES, FL 33029

FEI Number: 04-3648281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZANNIS, JASON
1500 N. UNIVERSITY DR.
112
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ZANNIS, JASON M
Address: 1627 NE 17TH AVE
City-St-Zip: FT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JASON ZANNIS

DP

04/30/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date