2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059327

Entity Name: JANA MCKENZIE, M.D., INC.

FILED Jan 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3153 BELLWIND CIRCLE VIERA, FL 329555156 US **Current Mailing Address: New Mailing Address:** 3153 BELLWIND CIRCLE VIERA, FL 32955 FEI Number: 35-2206824 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: RHOADES, RON A 2450 NORTH CITRUS HILLS BOULEVARD HERNANDO, FL 34442 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCKENZIE, JANA M.D. Name: Name:

 Title:
 PST () Delete
 Title: () Change () Addition

 Name:
 MCKENZIE, JANA M.D.
 Name:

 Address:
 3153 BELLWIND CIRCLE
 Address:

 City-St-Zip:
 VIERA, FL 32955 US
 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: JANA MCKENZIE MD PST 01/29/2009