

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000093808

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** STEVE NGUYEN, M.D., P.A.

**Current Principal Place of Business:**

7350 SANDLAKE COMMONS  
MEDPLEX B, SUITE 2205  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2723  
WINDERMERE, FL 34786

**New Mailing Address:**

**FEI Number:** 20-1271552      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

NGUYEN, STEVE M.D.  
3120 DOWNS COVE RD  
WINDERMERE, FL 34786      US

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

NGUYEN, VUONG (STEVE) M.D.  
3120 DOWNS COVE RD  
WINDERMERE, FL 34786      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: VUONG NGUYEN

03/02/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NGUYEN, VUONG (STEVE) MD  
Address: 3120 DOWNS COVE RD  
City-St-Zip: WINDERMERE, FL 34786

I hereby 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 all other like empowered.

SIGNATURE: VUONG NGUYEN

P

03/02/2010

Electronic Signature of Signing Officer or Director

Date