


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P92000014298</b> 1. Entity Name F. LEIGH PHILLIPS, III, M.D., P.A.	
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**FILED**  
**Sep 15, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business 2855 UNIVERSITY DR 400 CORAL SPRINGS, FL 33065	Mailing Address 2855 UNIVERSITY DR 400 CORAL SPRINGS, FL 33065
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DO NOT WRITE IN THIS SPACE

07082008    No Chg-P    CR2E034 (11/05)

4. FEI Number 65-0374602	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

PHILLIPS, F. LEIGH III  
 2855 UNIVERSITY DRIVE  
 STE 400  
 CORAL SPRINGS, FL 33065

DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

U00000959711  
 09/15/08-80003-017 150.00  
 DATE

FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIPS, LEIGH F. III 2855 UNIVERSITY DRIVE 400 CORAL SPRINGS, FL 33065
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: F. Leigh Phillips, III    Date: 8/28/08    Daytime Phone #: 954-344-4344

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #