

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Nov 21, 2007  
Secretary of State**

DOCUMENT# H15787

Entity Name: JOEL D. GREENBERG, M.D., P.A.

**Current Principal Place of Business:**

814 S. WASHINGTON AVE.  
SUITE A  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

814 S. WASHINGTON AVE.  
SUITE A  
TITUSVILLE, FL 32780

**New Mailing Address:**

FEI Number: 59-2437915      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEFKOWITZ, IVAN M  
LEFKOWITZ, KOLTUN & TOPHAM, P.A.  
430 NORTH MILLS AVENUE  
ORLANDO, FL 32803 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

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: ASCH, JOSEPH A., M.D., .  
Address: 1120 WOODCHUCK COURT  
City-St-Zip: TITUSVILLE, FL 32796

Title: VS (X) Delete  
Name: ZARATE, JUAN C.,  
Address: 212 COURTLAND AVENUE  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JOSEPH A. ASCH, M.D.

PTD

11/21/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date