## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT DOCUMENT #467085** 1. Entity Name KENNETH H. FARRELL, M.D., P.A.

**FILED** Jan 24, 2008 08:00 A Secretary of State



Principal Place of Business

Mailing Address

6405 N FEDERAL HWY

104

6405 N FEDERAL HWY

FORT LAUDERDALE, FL 33308

FORT LAUDERDALE, FL 33308



## DO: NOT: WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 01142008

4. FEI Number 59-1567174

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PLOUCHA, LAWRENCE M ONE FINANCIAL PLAZA, SUITE 1400 FORT LAUDERDALE, FL 33394

## DO:NOT:WRITE IN THIS SPACE

						villa i	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argnature required when reinstating)  DATE							
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10. ·	OFFICERS AND DIREC	CTORS					
TITLE	PST		100 m				
NAME	FARRELL,KENNETH H.		J. Salling				
STREET ADDRESS	6405 N FEDERAL HWY 104		5.8				
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308			<b>一个一个</b>			
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CITY-SY-ZIP			7		A CONTRACTOR OF THE SAME OF TH		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions cantained indicated on this report or supplemental report is true and accurate and that my signature shall have the sa of the corporation or the receiver or trustee empranered to execute this report as reported by Chapter 607. of the corporation or the receiver or trustee changed, or on an attachment with an add

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #