

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 476973

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: ERNEST P. PALMER, M.D., P.A.

## Current Principal Place of Business:

214 WEST PALMETTO STREET  
P.O. BOX 428  
WAUCHULA, FL 33873

## New Principal Place of Business:

214 WEST PALMETTO STREET  
214 W PALMETTO ST  
WAUCHULA, FL 33873

## Current Mailing Address:

214 WEST PALMETTO STREET  
P.O. BOX 428  
WAUCHULA, FL 33873

## New Mailing Address:

214 WEST PALMETTO STREET  
214 W PALMETTO ST P O BOX 428  
WAUCHULA, FL 33873

FEI Number: 59-1595925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMER, ERNEST  
214 WEST PALMETTO STREET  
WAUCHULA, FL 33873 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PALMER, ERNEST M.D.  
Address: 214 WEST PALMETTO ST.  
City-St-Zip: WAUCHULA, FL 33873

Title: S ( ) Delete  
Name: PALMER, GAYLE M.  
Address: 214 WEST PALMETTO ST.  
City-St-Zip: WAUCHULA, FL 33873

## 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: ERNEST P. PALMER

P

04/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date