

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 484991

Entity Name: A.J. BARHOUSH M.D., P.A.

FILED  
Feb 15, 2010  
Secretary of State

**Current Principal Place of Business:**

1054 SW 1ST AVE.  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

1054 SW 1ST AVE.  
OCALA, FL 34474

**New Mailing Address:**

FEI Number: 59-1625727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BARHOUSH, A J  
1054 SW 1ST AVENUE  
OCALA, FL 34474 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: PD  
Name: BARHOUSH, A J  
Address: 1054 SW FIRST AVE  
City-St-Zip: OCALA, FL 34474

Title: T  
Name: BARHOUSH, A.J.  
Address: 1054 SW FIRST AVE  
City-St-Zip: OCALA, FL 34474

Title: S  
Name: WALKER, VALECIA  
Address: 1986 LAURAL RUN DRIVE  
City-St-Zip: OCALA, FL 34471

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: AJ BARHOUSH

PD

02/15/2010

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

\_\_\_\_\_  
Date