

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 484991

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

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

**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:**

712 SE 3RD AVENUE  
OCALA, FL 34471

**FEI Number:** 59-1625727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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:**

BARHOUSH, A J  
712 SE 3RD AVENUE  
OCALA, FL 34471 US

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

03/22/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BARHOUSH, A J  
Address: 712 SE 3RD AVENUE  
City-St-Zip: OCALA, FL 34471

Title: T  
Name: BARHOUSH, A.J.  
Address: 712 SE 3RD AVENUE  
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

Electronic Signature of Signing Officer or Director

PD

03/22/2011

Date