

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 555074

FILED
Jul 02, 2009
Secretary of State

Entity Name: G. STANFORD PIERCE, D.C., P.A.

Current Principal Place of Business:

2201-62ND AVE N
SAINT PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

2201-62ND AVE N
SAINT PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-1843348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, G. STANFORD
2201-62ND AVENUE N
SAINT PETERSBURG, FL 33702 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PIERCE, G. STANFORD
Address: 6721 23RD STREET N
City-St-Zip: ST. PETERSBURG, FL

Title: VTS () Delete
Name: PIERCE, JUDITH M
Address: 6721 23RD STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: V () Delete
Name: PIERCE, G STANFORD JR
Address: 5700 TANGLEWOOD DR NE
City-St-Zip: SAINT PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TS (X) Change () Addition
Name: PIERCE, JUDITH M
Address: 6721 23RD STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

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: JUDITH M. PIERCE

TS

07/02/2009

Electronic Signature of Signing Officer or Director

Date