

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 571839

FILED
Mar 06, 2009
Secretary of State

Entity Name: PANAMA CITY UROLOGICAL CENTER, P.A.

Current Principal Place of Business:

80 DOCTORS DR
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

80 DOCTORS DR
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-1822901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNN, MD N P
80 DOCTORS DR
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

DUNN, NEAL P MD
80 DOCTORS DR
PANAMA CITY, FL 32405 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: NEAL P. DUNN MD

03/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUNN, NEAL P MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL

Title: V () Delete
Name: HEALEY, DENIS E. MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL

Title: S () Delete
Name: BEISWANGER, JAY C MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: T () Delete
Name: RAMOS, CARLOS E MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: S () Delete
Name: EISENBROWN, NICOLE MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: S () Delete
Name: JENKINS, MICHAEL A MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUNN, NEAL P MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL

Title: V (X) Change () Addition
Name: HEALEY, DENIS E MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL

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

Title: T (X) Change () Addition
Name: RAMOS, CARLOS E MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: S (X) Change () Addition
Name: EISENBROWN, JEANNE N MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

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: NEAL P. DUNN

DR

03/06/2009

Electronic Signature of Signing Officer or Director

Date