

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600835

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: CENTRAL FLORIDA CARDIOLOGY GROUP, P.A.

## Current Principal Place of Business:

1745 NORTH MILLS AVE  
SUITE 100  
ORLANDO, FL 32803

## New Principal Place of Business:

1745 NORTH MILLS AVE  
SUITE 100  
ORLANDO, FL 32803

## Current Mailing Address:

PO BOX 533101  
ORLANDO, FL 328533101

## New Mailing Address:

1745 NORTH MILLS AVE  
SUITE 100  
ORLANDO, FL 32803

FEI Number: 59-1232309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAUSSIG, ANDREW S MD  
1745 NORTH MILLS AVE  
SUITE 100  
ORLANDO, FL 32803 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: DP ( ) Delete  
Name: TAUSSIG, ANDREW S DR  
Address: 1745 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: DS ( ) Delete  
Name: STORY, WILLIAM E DR  
Address: 1745 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: DT ( ) Delete  
Name: POLLAK, SCOTT J DR  
Address: 1745 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: DV ( ) Delete  
Name: WHITWORTH, HALL B JR, DR  
Address: 1745 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: DV ( ) Delete  
Name: RODRIGUEZ, RALPH A DR  
Address: 1745 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: TAUSSIG, ANDREW S  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

Title: DS (X) Change ( ) Addition  
Name: STORY, WILLIAM E  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

Title: DT (X) Change ( ) Addition  
Name: POLLAK, SCOTT J  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

Title: DV (X) Change ( ) Addition  
Name: BARNETT, J. CRAIG  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

Title: DV (X) Change ( ) Addition  
Name: RODRIGUEZ, A. RALPH  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

Title: DV ( ) Change (X) Addition  
Name: KUMAR, ANIL  
Address: 1745 NORTH MILLS AVE, #100  
City-St-Zip: ORLANDO, FL 32803

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: ANDREW S. TAUSSIG

DP

04/23/2009

Electronic Signature of Signing Officer or Director

Date