

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604632

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** ROBERT L. KANTOR, M.D., P.A.

**Current Principal Place of Business:**

2111 BEE RIDGE ROAD  
SARASOTA, FL 34239 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 1820 RINGLING BLVD.  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 59-1480300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAWRENCE M. HANKIN, P.A.  
1820 RINGLING BLVD.  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KANTOR, RONA  
Address: 421 MEADOW LARK DRIVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: D  
Name: FIELD, STEPHANIE  
Address: 11 VENETO  
City-St-Zip: NEWPORT COAST, CA 92657 US

Title: D  
Name: HAWKINS, MIKE  
Address: 330 S. PINEAPPLE AVE., #106  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: HANKIN, LAWRENCE M  
Address: 1820 RINGLING BLVD.  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: HEMENWAY, JERRY  
Address: 1800 SECOND STREET, #730  
City-St-Zip: SARASOTA, FL 34236

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: LAWRENCE M HANKIN

D

04/06/2012

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

\_\_\_\_\_  
Date