2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #644451

1. Entity Name JAMES J. HYNICK, D.O., P.A.



FILED Jan 24, 2008 08:00 A Secretary of State

Principal Place of Business

301 E. HWY 434 LONGWOOD, FL 32750 Mailing Address

301 E. HWY 434 LONGWOOD, FL 32750



DO NOT WRITE IN THIS SPACE	01112008	No Chg-P	CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE	4. FEI Number		Applied F

59-1966381 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

4. FEI Number

Fee Required

Applied For

6. Name and Address of Current Registered Agent

HYNICK, JAMES J., D.O. 102 SAND PINE LANE LONGWOOD, FL 32779

DO NOT WRITE IN THIS SPACE

	trons of registered agent.	ourpose of changing its registe	ered office or i	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
7	Signature, typed or printed name of registered agent and title	l applicable. (NOTE: Registe	red Agent signatur	e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fire Trust Fund Contribution			\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYNICK, JAMES J DO 102 SAND PINE LANE LONGWOOD, FL 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000794804 01/28/08-80022-015 150.00
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TITLE NAME' 12 5 5 STREET ADDRESS]		· · · · · · · · · · · · · · · · · · ·

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachme it with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP