# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F36815

**Entity Name:** SANDY MARTIN, M.D., J.D., P.A.

**Current Principal Place of Business:**

6545 NW 39 TERRACE
BOCA RATON, FL 33496

**New Principal Place of Business:**

1724 SE 7TH ST
FT. LAUDERDALE, FL 33316

**Current Mailing Address:**

2901 CLINT MOORE RD
#197
BOCA RATON, FL 33496

**New Mailing Address:**

1724 SE 7TH ST
FT. LAUDERDALE, FL 33316

FEI Number: 59-2095008          FEI Number Applied For ( )          FEI Number Not Applicable ( )          Certificate of Status Desired ( )

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

MARTIN, SANDY
2901 CLINT MOORE ROAD
#197
BOCA RATON, FL 33496 US

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

MARTIN, SANDY
1724 SE 7TH ST
FT. LAUDERDALE, FL 33316     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: _____     02/29/2008
                    Electronic Signature of Registered Agent                                           Date

**Election Campaign Financing Trust Fund Contribution ( ).**

## OFFICERS AND DIRECTORS:

Title:          DR          ( ) Delete
Name:        MARTIN, SANDY
Address:     2901 CLINT MOORE ROAD, #197
City-St-Zip:  BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:          DR          (X) Change ( ) Addition
Name:        MARTIN, SANDY
Address:     1724 SE 7TH ST
City-St-Zip:  FT. LAUDERDALE, FL 33316

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:  SANDY MARTIN MD, ESQ                              PRES               02/29/2008
                    Electronic Signature of Signing Officer or Director                                          Date