

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G35310

FILED  
Feb 27, 2009  
Secretary of State

**Entity Name:** GASTROENTEROLOGY ASSOCIATES OF ST. AUGUSTINE, P.A.

**Current Principal Place of Business:**

216 SOUTHPARK CIR. EAST  
P.O. BOX 2208  
ST AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

216 SOUTHPARK CIR. EAST  
ST AUGUSTINE, FL 32086 US

**Current Mailing Address:**

216 SOUTHPARK CIRCLE EAST  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 59-2282957      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ROSADO, SANTIAGO A.M.D.  
216 SOUTHPARK CIR. EAST  
ST. AUGUSTINE, FL 32086 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: PD ( ) Delete  
Name: ROSADO, SANTIAGO A  
Address: 216 SOUTHPARK CIR. EAST  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: VILLANUEVA, STEVEN Y  
Address: 216 SOUTHPARK CIR. EAST  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: CAVACINI, TIMOTHY J  
Address: 216 SOUTHPARK CIR. EAST  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: SOROKA, STUART A  
Address: 216 SOUTHPARK CIRCLE E.  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D ( ) Change (X) Addition  
Name: GASSERT, DANIEL J  
Address: 216 SOUTHPARK CIRCLE EAST  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: SANTIAGO A. ROSADO

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date