

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47407

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: SHYAM B. PARYANI, M.D., P.A.

## Current Principal Place of Business:

3599 UNIVERSITY BLVD S  
SUITE 1000  
JACKSONVILLE, FL 32216 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 19919  
JACKSONVILLE, FL 32245 US

## New Mailing Address:

FEI Number: 59-2308016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARYANI, SHYAM B MD  
8001 JAMES ISLAND TRAIL  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

PARYANI, SHYAM B MD  
1029 PONTE VEDRA BLVD.  
PONTE VEDRA BEACH, FL 32082 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: SHYAM B. PARYANI, MD

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: PARYANI, SHYAM B MD  
Address: 8001 JAMES ISLAND TRAIL  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PARYANI, SHYAM B MD  
Address: 1029 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: SHYAM B. PARYANI, MD

DP

04/20/2009

Electronic Signature of Signing Officer or Director

Date