

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77675

FILED  
Jan 24, 2011  
Secretary of State

**Entity Name:** DRS. CONVERSE AND LESSARD, P.A.

**Current Principal Place of Business:**

7511 FOLK WAY  
LAKELAND, FL 33809

**New Principal Place of Business:**

**Current Mailing Address:**

7511 FOLK WAY  
LAKELAND, FL 33809

**New Mailing Address:**

FEI Number: 59-2594160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LESSARD, PAUL  
7511 FOLK WAY  
LAKELAND, FL 33809 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: PD  
Name: LESSARD, PAUL, O.D.  
Address: 7511 FOLK WAY  
City-St-Zip: LAKELAND, FL 33809

Title: STD  
Name: CONVERSE, JUNE, O.D.  
Address: 7511 FOLK WAY  
City-St-Zip: LAKELAND, FL 33809

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: PAUL LESSARD

PD

01/24/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date