

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J11705

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** STEVEN POWELL, M.D., P.A.

**Current Principal Place of Business:**

% STEVEN POWELL  
2910 S.E. 3RD COURT  
OCALA, FL 34471 US

**New Principal Place of Business:**

2910 SE 3RD CT  
SUITE A  
OCALA, FL 34471 US

**Current Mailing Address:**

% STEVEN POWELL  
2910 S.E. 3RD COURT  
OCALA, FL 34471 US

**New Mailing Address:**

2910 SE 3RD CT  
SUITE A  
OCALA, FL 34471 US

**FEI Number:** 59-2660405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POWELL, STEVEN  
2910 S.E. 3RD COURT  
OCALA, FL 34471 US

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

FUTCH, WILLIAM  
610 SE 17TH STREET  
SUITE A  
OCALA, FL 34471 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:** R. WILLIAM FUTCH

03/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** POWELL, STEVEN  
**Address:** 2910 S.E. 3RD COURT SUITE A  
**City-St-Zip:** Ocala, FL 34471

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:** STEVEN T. POWELL, MD

PRES

03/28/2011

Electronic Signature of Signing Officer or Director

Date