

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K47509

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: WEST ORLANDO PEDIATRICS, PA

## Current Principal Place of Business:

% BARRY S. YARCKIN  
10125 WEST COLONIAL DRIVE, SUITE 102  
OCOOE, FL 34761

## New Principal Place of Business:

BARRY S. YARCKIN  
10125 WEST COLONIAL DRIVE, SUITE 102  
OCOOE, FL 34761

## Current Mailing Address:

% BARRY S. YARCKIN  
10125 WEST COLONIAL DRIVE, SUITE 102  
OCOOE, FL 34761

## New Mailing Address:

BARRY S. YARCKIN  
10125 WEST COLONIAL DRIVE, SUITE 102  
OCOOE, FL 34761

FEI Number: 59-2930733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YARCKIN, BARRY S DR.  
10125 W. COLONIAL DR.  
STE 102  
OCOOE, FL 34761 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: P ( ) Delete  
Name: YARCKIN, BARRY S DR  
Address: 5317 TILDENS GROVE BLVD  
City-St-Zip: WINDERMERE, FL 34786

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: YARCKIN, BARRY S

DR

01/22/2009

Electronic Signature of Signing Officer or Director

Date