## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K93197

Entity Name: DOUGLAS K. PIERCE, M.D. P.A.

FILED Jan 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O DOUGLAS K. PIERCE M.D. 8787 BRYAN DAIRY RD 8787 BRYAN DAIRY RD # 360 # 360

LARGO, FL 33777 US LARGO, FL 33777 US

Current Mailing Address: New Mailing Address:

 C/O DOUGLAS K. PIERCE M.D.
 8787 BRYAN DAIRY RD

 8787 BRYAN DAIRY RD # 360
 # 360

 LARGO, FL 33777
 US

 LARGO, FL 33777
 US

FEI Number: 59-2949132 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PIERCE, DOUGLAS K. M.D.

8787 BRYAN DAIRY RD

STE 360

LABGO, EL 33777 LIS

PIERCE, DOUGLAS K. DR.

8787 BRYAN DAIRY RD

#360

LABGO, EL 33777 LIS

LARGO, FL 33777 US LARGO, FL 33777 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: DOUGLAS K. PIERCE 01/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PD () Delete Title: PD (X) Change () Addition Name: PIERCE, DOUGLAS K. M, .D. Name: PIERCE, DOUGLAS K. DR. Address: 8787 BRYAN DAIRY RD STE 360 Address: 8787 BRYAN DAIRY RD #360

City-St-Zip: LARGO, FL 33777 City-St-Zip: LARGO, FL 33777

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: DOUGLAS K. PIERCE DR. 01/14/2008

Electronic Signature of Signing Officer or Director

Date