

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L15800

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: STEPHEN M. SINKOE, D.P.M., P.A.

**Current Principal Place of Business:**

%STEPHEN M. SINKOE  
5558 S FLAMINGO ROAD  
COOPER CITY, FL 33330

**New Principal Place of Business:**

5500 S. FLAMINOG ROAD  
SUITE 204  
COOPER CITY, FL 33330

**Current Mailing Address:**

%STEPHEN M. SINKOE  
5558 S FLAMINGO ROAD  
COOPER CITY, FL 33330

**New Mailing Address:**

5500 S. FLAMINOG ROAD  
SUITE 204  
COOPER CITY, FL 33330

FEI Number: 65-0151612

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEITH BENNETT CPA  
8181 W BROWARD BLVD  
SUITE 255  
PLANTATION, FL 33324 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: DR ( ) Delete  
Name: SINKOE, STEPHEN M  
Address: 5558 S FLAMINGO RD  
City-St-Zip: COOPER CITY, FL 33330

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

Title: DR (X) Change ( ) Addition  
Name: SINKOE, STEPHEN M  
Address: 5500 S FLAMINGO ROAD SUITE 204  
City-St-Zip: COOPER CITY, FL 33330

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: STEPHEN M SINKOE

DR

04/22/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date