2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L39125

City-St-Zip:

VERO BEACH, FL

Entity Name: JOHN T. DAVIDSON M.D., F.R.C.S., P.A.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
STE 1H	H STREET ACH, FL 3296	0			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
STE 1H	H STREET ACH, FL 3296	0			
FEI Number	r: 65-0161922	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1300 36TH UNIT 1H	N, JOHN T. H ST ACH, FL 3296	O US			
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	D () DAVIDSON, JO 400 INDIAN HA	*	Title: Name: Address:	() Change () Addition	

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: JOHN T. DAVIDSON DR 03/12/2009