

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L79558

FILED
Mar 20, 2009
Secretary of State

Entity Name: SCHWENKER & STAVOY, M.D., P.A.

Current Principal Place of Business:

1890 LPGA BLVD,
DAYTONA BEACH, FL 32117 US

Current Mailing Address:

1890 LPGA BLVD,
DAYTONA BEACH, FL 32117 US

New Principal Place of Business:

1890 LPGA BLVD,
#160
DAYTONA BEACH, FL 32117 US

New Mailing Address:

1890 LPGA BLVD,
#160
DAYTONA BEACH, FL 32117 US

FEI Number: 59-3002130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELCH, MATTHEW
150 SOUTH PALMETTO AVENUE - 3RD FLOOR
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

PYLE, MICHAEL
1655 NO CLYDE MORRIS
SUITE 1
DAYTONA BEACH, FL 32117 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: MICHAEL PYLE

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STAVOY, THOMAS G. M., D.
Address: 1890 LPGA BLVD, STE 160
City-St-Zip: DAYTONA BEACH, FL 32117

Title: V () Delete
Name: CARBIENER, PAMELA
Address: 1890 LPGA BLVD, STE 160
City-St-Zip: DAYTONA BEACH, FL 32117

Title: VP () Delete
Name: CORTEZ, STEPHEN J
Address: 1890 LPGA BLVD, STE 160
City-St-Zip: DAYTONA BEACH, FL 32117

Title: ST () Delete
Name: STANLEY, CHRISTOPHER J
Address: 1890 LPGA BLVD, STE 160
City-St-Zip: DAYTONA BEACH, FL 32117

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DIR () Change (X) Addition
Name: BALDWIN, CYNTHIA
Address: 1890 LPGA BV #160
City-St-Zip: DAYTONA BEACH, FL 32117

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: THOMAS G. STAVOY

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date