

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000003271

Entity Name: SETH COHEN, M.D., P.A.

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1109 UNDERWOOD DRIVE  
VENICE, FL 34292

**New Principal Place of Business:**

395 COMMERCIAL COURT  
SUITE E  
VENICE, FL 34292

**Current Mailing Address:**

1109 UNDERWOOD DRIVE  
VENICE, FL 34292

**New Mailing Address:**

FEI Number: 59-3620577

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCURLEY, JANETTE M ESQ.  
100 SECOND AVE, SOUTH  
SUITE 101  
SAINT PETERSBURG, FL 33701 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COHEN, SETH  
Address: 395 COMMERCIAL COURT, SUITE E  
City-St-Zip: VENICE, FL 34292

I hereby 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 all other like empowered.

SIGNATURE: SETH COHEN

P

03/21/2012

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

\_\_\_\_\_  
Date