

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000006963

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** LAWRENCE A. LISSKA, M.D., P.A.

**Current Principal Place of Business:**

4130 SALISBURY ROAD SE 1900  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

4130 SALISBURY ROAD SE 1900  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 59-3619444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LISSKA, LAWRENCE A  
4130 SALISBURY RD, STE 1900  
JACKSONVILLE, FL 32216 US

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

LISSKA, LAWRENCE A  
4130 SALISBURY RD,  
STE 1900  
JACKSONVILLE, FL 32216 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:** LAWRENCE A. LISSKA

03/08/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LISSKA, LAWRENCE A  
**Address:** 10404 SYLVAN LANE W  
**City-St-Zip:** JACKSONVILLE, FL 32257

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:** LAWRENCE A. LISSKA

PRES

03/08/2010

Electronic Signature of Signing Officer or Director

Date