

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014518

Entity Name: ROBERT S. CUTLER, D.O., P.A.

FILED
Mar 07, 2008
Secretary of State

Current Principal Place of Business:

13005 SOUTHERN BOULEVARD
SUITE 121, MEDICAL MALL 1
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

PO BOX 211465
WEST PALM BEACH, FL 33421

New Mailing Address:

PO BOX 211465
WEST PALM BEACH, FL 33421 14

FEI Number: 65-0981572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUTLER, ROBERT S
155 SEGOVIA WAY
JUPITER, FL 33458 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: CUTLER, ROBERT S D.O.
Address: 155 SEGOVIA WAY
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: ROBERT S CUTLER

PR

03/07/2008

Electronic Signature of Signing Officer or Director

_____ Date