

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 01, 2010
Secretary of State

Entity Name: JACOB A. SAMANDER, M.D., P.A.

Current Principal Place of Business:

1870 N. LAWNWOOD CIRCLE
FORT PIERCE, FL 34950

New Principal Place of Business:

1401 SE GOLDTREE DRIVE , SUITE 104
PORT ST. LUCIE, FL 34952

Current Mailing Address:

1870 N. LAWNWOOD CIRCLE
FORT PIERCE, FL 34950

New Mailing Address:

P.O. BOX 882076
PORT ST. LUCIE, FL 34988

FEI Number: 65-0982448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMANDER, JACOB A M.D.
1870 N. LAWNWOOD CIRCLE
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

SAMANDER, JACOB A M.D.
1401 SE GOLDTREE DRIVE, SUITE 104
PORT ST. LUCIE, FL 34952 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:

04/01/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: SAMANDER, JACOB A M.D.
Address: P.O. BOX 882076
City-St-Zip: PORT ST. LUCIE, FL 34988

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: JACOB A. SAMANDER

PRES

04/01/2010

Electronic Signature of Signing Officer or Director

Date