

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029925

FILED
Apr 28, 2009
Secretary of State

Entity Name: SOUTHWEST FLORIDA FERTILITY CENTER, P.A.

Current Principal Place of Business:

13685 DOCTORS WAY
SUITE 330
FORT MYERS, FL 33912

New Principal Place of Business:

15730 NEW HAMPSHIRE COURT
SUITE 101
FORT MYERS, FL 33908

Current Mailing Address:

13685 DOCTORS WAY
SUITE 330
FORT MYERS, FL 33912

New Mailing Address:

15730 NEW HAMPSHIRE COURT
SUITE 101
FORT MYERS, FL 33908

FEI Number: 65-0996839

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOCK, JACOB DR.
13685 DOCTORS WAY
SUITE 330
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

GLOCK, JACOB DR.
15730 NEW HAMPSHIRE COURT
SUITE 101
FORT MYERS, FL 33908 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: JACOB L. GLOCK, MD

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLOCK, JACOB L
Address: 799 CYPRESS LAKE CIRCLE
City-St-Zip: FORT MYERS, FL 33919

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: JACOB L. GLOCK, MD

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date