

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087592

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** WEIRSDALE FAMILY HEALTH CENTER, INC.

**Current Principal Place of Business:**

16400 S HWY 25 (PO BOX 8)  
WEIRSDALE, FL 32195

**New Principal Place of Business:**

16400 S HWY 25  
WEIRSDALE, FL 32195

**Current Mailing Address:**

16400 S HWY 25 (PO BOX 8)  
WEIRSDALE, FL 32195

**New Mailing Address:**

**FEI Number:** 59-3670986

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAUTHEN, WILLIAM H ESQ  
255 N JOANNA AVENUE  
TAVARES, FL 327783200 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: D ( ) Delete  
Name: RADNOTHY, LOUIS J  
Address: PO DRAWER 2325  
City-St-Zip: UMATILLA, FL 32784

Title: D ( ) Delete  
Name: GAVIN, GEORGE G  
Address: 41419 TARPON AVENUE  
City-St-Zip: UMATILLA, FL 32784

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LOUIS J. RADNOTHY

D

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date