

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092864

FILED
Apr 30, 2008
Secretary of State

Entity Name: RALPH J. ZWOLINSKI, M.D., INC.

Current Principal Place of Business:

3951 S NOVA ROAD
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

3951 SOUTH NOVA ROAD
PORT ORANGE, FL 32127

New Mailing Address:

3951 S NOVA ROAD
PORT ORANGE, FL 32127

FEI Number: 59-3713284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LUNSFORD, ANNE F ESQ.
305 CLYDE MORRIS BOULEVARD
SUITE 190
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

KANCILIA, JOHN ESQ.
1800 WEST HIBISCUS BLVD
SUITE 138
MELBOURNE, FL 329032174 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: JOHN R, KANCILIA

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZWOLINSKI, RALPH J M.D.
Address: 6325 PALMAS BAY CIRCLE
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: ZWOLINSKI, RALPH J M.D.
Address: 6325 PALMAS BAY CIRCLE
City-St-Zip: PORT ORANGE, FL 32127

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: RALPH J. ZWOLINSKI, MD

DR.

04/30/2008

Electronic Signature of Signing Officer or Director

Date