

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121823

Entity Name: STEVEN CHUN, M.D., P.A.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

6150 EDGELAKE DRIVE
SARASOTA, FL 34240

New Principal Place of Business:

6310 HEALTH PARK WAY, SUITE 320
BRADENTON, FL 34202

Current Mailing Address:

6150 EDGELAKE DRIVE
SARASOTA, FL 34240

New Mailing Address:

6310 HEALTH PARK WAY, SUITE 320
BRADENTON, FL 34202

FEI Number: 01-0699775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHUN, STEVEN
6150 EDGELAKE DRIVE
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

CHUN, STEVEN
6310 HEALTH PARK WAY, SUITE 320
BRADENTON, FL 34202 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: STEVEN CHUN, M.D.

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: CHUN, STEVEN
Address: 6150 EDGELAKE DRIVE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: CHUN, STEVEN
Address: 6310 HEALTH PARK WAY, SUITE 320
City-St-Zip: BRADENTON, FL 34202

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: STEVE CHUN, M.D.

DR

03/23/2009

Electronic Signature of Signing Officer or Director

Date