2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# P02000049012

Entity Name: DAVID N. KENIGSBERG, M.D., P.A.

Current Principal Place of Business:

350 NW 84TH AVE
305
PLANTATION, FL 33324

New Principal Place of Business:

350 NW 84TH AVE
110
PLANTATION, FL 33324

Current Mailing Address:

P O BOX 17958
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 30-0170159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENIGSBERG, KOLMAN
520 HOLIDAY DRIVE
HALLANDALE, FL 33009 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: PD ( ) Delete
Name: KENIGSBERG, DAVID N M.D
Address: 350 NW 84TH AVENUE, SUITE #305
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KENIGSBERG, DAVID N M.D
Address: 350 NW 84TH AVENUE, SUITE #110
City-St-Zip: PLANTATION, FL 33324

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: DAVID N. KENIGSBERG, MD PD 02/09/2009

Electronic Signature of Signing Officer or Director Date