

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006989

Entity Name: DANIEL M. JACOBS, M.D., P.A.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

319 S. RIVERSIDE DRIVE
POMPANO, FL 33062

New Principal Place of Business:

Current Mailing Address:

319 S. RIVERSIDE DRIVE
POMPANO, FL 33062

New Mailing Address:

FEI Number: 55-0820491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 33311 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:

Electronic Signature of Registered Agent

01/19/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: JACOBS, DANIEL M MD
Address: 319 S. RIVERSIDE DRIVE
City-St-Zip: POMPAÑO, FL 33062

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: DANIEL M JACOBS

Electronic Signature of Signing Officer or Director

DR

01/19/2009

Date