

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096726

FILED  
Mar 15, 2008  
Secretary of State

Entity Name: STUART L. WANUCK, M.D., P.A.

## Current Principal Place of Business:

1920 PALM BEACH LAKES BLVD.  
STE. 115  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

## Current Mailing Address:

1920 PALM BEACH LAKES BLVD.  
STE. 115  
WEST PALM BEACH, FL 33409

## New Mailing Address:

FEI Number: 57-1186806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZANE, JEFFREY P ESQ.  
4800 RIVERSIDE DRIVE  
PALM BEACH GARDENS, FL 33410 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: MD ( ) Delete  
Name: WANUCK, STUART L  
Address: 1920 PALM BEACH LAKES BLVD., #115  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change ( ) Addition  
Name: WANUCK, STUART L  
Address: 1920 PALM BEACH LAKES BLVD. SUITE 115  
City-St-Zip: WEST PALM BEACH, FL 33409

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: STUART L. WANUCK

MD

03/15/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date