

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102607

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

**Entity Name:** JULIO R. SANDOVAL, M.D., P.A.

**Current Principal Place of Business:**

1817 W. WATROVS AVE.  
TAMPA, FL 33606

**New Principal Place of Business:**

1817 W. WATROUS AVE.  
TAMPA, FL 33606

**Current Mailing Address:**

1817 W. WATROVS AVE.  
TAMPA, FL 33606

**New Mailing Address:**

1817 W. WATROUS AVE.  
TAMPA, FL 33606

**FEI Number:** 65-1206188

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANDOVAL, JULIO R M.D.  
1817 W. WATROVS AVE.  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

SANDOVAL, JULIO R M.D.  
1817 W. WATROUS AVE.  
TAMPA, FL 33606 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: JULIO R. SANDOVAL

04/29/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SANDOVAL, JULIO R M.D.  
Address: 522 N. AFTER-GLOW CIRCLE  
City-St-Zip: CRYSTAL RIVER, FL 34429

**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: JULIO R. SANDOVAL

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date