

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092206

FILED
Jan 08, 2008
Secretary of State

Entity Name: FELIX ANDARSIO, D.O., P.A.

Current Principal Place of Business:

1397 STATE ROAD 7
SUITE # 440
WELLINGTON, FL 33414 US

New Principal Place of Business:

1397 MEDICAL PARK BLVD
SUITE # 440
WELLINGTON, FL 33414 US

Current Mailing Address:

1394 BEACON CIRCLE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 20-1306647 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ANDARSIO, FELIX JR.
1394 BEACON CIRCLE
WELLINGTON, FL 33414 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: P () Delete
Name: ANDARSIO, FELIX JR.
Address: 1394 BEACON CIRCLE
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: ANDARSIO, FELIX JR.
Address: 1394 BEACON CIRCLE
City-St-Zip: WELLINGTON, FL 33414 US

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: FELIX ANDARSIO JR

DR.

01/08/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date