

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129610

FILED  
Apr 28, 2010  
Secretary of State

Entity Name: STANLEY A. COHEN, D.O., P.A.

## Current Principal Place of Business:

4235 MARSH LANDING BLVD.  
#832  
JACKSONVILLE BEACH, FL 32250

## New Principal Place of Business:

354 PASEO REYES DRIVE  
ST.AUGUSTINE, FL 32095

## Current Mailing Address:

4235 MARSH LANDING BLVD.  
#832  
JACKSONVILLE BEACH, FL 32250

## New Mailing Address:

354 PASEO REYES DRIVE  
ST.AUGUSTINE, FL 32095

FEI Number: 51-0532126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, KEITH H ESQ.  
8810 GOODBYS EXECUTIVE DRIVE  
A  
JACKSONVILLE, FL 32217 US

## Name and Address of New Registered Agent:

FULLER, NORMAN  
9196 SUGARLAND DRIVE  
JACKSONVILLE, FL 32256 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: NORMAN FULLER

04/28/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: COHEN, STANLEY A  
Address: 4235 MARSH LANDING BLVD. #832  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP  
Name: FULLER, ANTONIA  
Address: 9196 SUGARLAND DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR  
Name: KENTON, STELLA F  
Address: 81 MASTERS DRIVE  
City-St-Zip: ST.AUGUSTINE, FL 32084

I hereby 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 all other like empowered.

SIGNATURE: STANLEY A COHEN, D.O., PA

PRES

04/28/2010

Electronic Signature of Signing Officer or Director

Date