

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000087828

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** VERNON P. MONTOYA, M.D.,P.A.

**Current Principal Place of Business:**

4355 N W AMERICAN LANE  
LAKE CITY, FL 32055

**New Principal Place of Business:**

4355 N.W AMERICAN LANE  
LAKE CITY, FL 32055

**Current Mailing Address:**

4355 N W AMERICAN LANE  
LAKE CITY, FL 32055

**New Mailing Address:**

4355 N.W AMERICAN LANE  
LAKE CITY, FL 32055

**FEI Number:** 34-2000677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASBELL, PAIGE B  
4355 N W AMERICAN LANE  
LAKE CITY, FL 32055 US

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

RAPPA, SHELBY  
4355 N.W AMERICAN LANE  
LAKE CITY, FL 32055 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:** SHELBY RAPPA

01/08/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** MD  
**Name:** MONTOYA, VERNON P  
**Address:** 4355 N.W AMERICAN LANE  
**City-St-Zip:** LAKE CITY, FL 32055

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:** VERNON P. MONTOYA

MD

01/08/2010

Electronic Signature of Signing Officer or Director

Date