

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129463

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKELAND PROFESSIONAL HEARING CENTER, INC.

Current Principal Place of Business:

5375 NORTH SOCRUM LOOP ROAD
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

1412 WYNGATE LANE
LAKELAND, FL 33809

New Mailing Address:

5353 N SOCRUM LOOP RD
LAKELAND, FL 33809

FEI Number: 20-3519824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOWALTER, TONYA L M.S.
1412 WYNGATE LANE
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

SHOWALTER, TONYA L AUD
1412 WYNGATE LANE
LAKELAND, FL 33809 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: TONYA L SHOWALTER AUD

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHOWALTER, TONYA L M.S.
Address: 1412 WYNGATE LANE
City-St-Zip: LAKELAND, FL 33809 US

Title: VP () Delete
Name: SHOWALTER, NATHAN J
Address: 1412 WYNGATE LANE
City-St-Zip: LAKELAND, FL 33809 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHOWALTER, TONYA L AUD
Address: 1412 WYNGATE LANE
City-St-Zip: LAKELAND, FL 33809 US

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: TONYA L SHOWALTER AUD

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date