

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000162612

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** SARAH KNOWLTON M.D., PA

**Current Principal Place of Business:**

15490 BELLANCA LANE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

15490 BELLANCA LANE  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 20-3934265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FROELICH & DE LA RUA CPA FIRM  
12008 SOUTHSORE BLVD  
WEST PALM BEACH, FL 33411 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KNOWLTON, SARAH MD  
Address: 15490 BELLANCA LANE  
City-St-Zip: WELLINGTON, FL 33414

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:** SARAH KNOWLTON

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05/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date