## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P06000010947

Entity Name: TODD DARMODY, MD, INC.

FILED Mar 09, 2009 Secretary of State

1625 SE 3RD AVE. SUITE 601 FORT LAUDERDALE, FL 33316

Current Mailing Address: New Mailing Address:

1625 SE 3RD AVE SUITE 601 FORT LAUDERDALE, FL 33316

FEI Number: 20-4111164 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FLECHA, JANICE

1625 SE 3RD AVE, SUITE 601

1625 SE 3RD AVE, SUITE 601

1625 SE 3RD AVE, SUITE 601

FORT LAUDERDÁLE, FL 33316 US FORT LAUDERDÁLE, FL 33316 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: JANICE DARMODY 03/09/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DARMODY, TODD MD
 Name:

 Address:
 1625 SE 3RD AVE, 601
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:

 Name:
 FLECHA, JANICE
 Name:
 DARMODY, JANICE

 Address:
 1625 SE 3RD AVE, 601
 Address:
 1625 SE 3RD AVE, 601

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:
 FORT LAUDERDALE, FL 33316

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: TODD DARMODY TD 03/09/2009