

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000027223

Entity Name: JAMIL H. KHAN, M.D., P.A.

FILED
Mar 02, 2008
Secretary of State

Current Principal Place of Business:

1050 US HWY - 27
SUITE 5
CLERMONT, FL 34714

New Principal Place of Business:

1528 SUNRISE PLAZA DRIVE
SUITE 1
CLERMONT, FL 34714

Current Mailing Address:

8798 DARLENE DR
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 20-4376807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, JAMIL H
8798 DARLENE DR
ORLANDO, FL 32836 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: KHAN, JAMIL H
Address: 1050 US HWY - 27 STE 5
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: KHAN, JAMIL H
Address: 1528 SUNRISE PLAZA DRIVE, SUITE 1
City-St-Zip: CLERMONT, FL 34714

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: JAMIL H. KHAN

DPST

03/02/2008

Electronic Signature of Signing Officer or Director

_____ Date