

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000033125

Entity Name: NEIL A. THIERRY, M.D., P.A.

FILED
Mar 29, 2009
Secretary of State

Current Principal Place of Business:

710 OAKFIELD DRIVE
SUITE 252
BRANDON, FL 33511 US

New Principal Place of Business:

11329 STRATTON PARK DRIVE
TEMPLE TERRACE, FL 33617 US

Current Mailing Address:

11329 STRATTON PARK DRIVE
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 20-4580288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAFFER, JAMES R ESQ.
120 S. WILLOW AVENUE
TAMPA, FL 33606 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: DR. () Delete
Name: THIERRY, NEIL A
Address: 11329 STRATTON PARK DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NEIL A. THIERRY

DR.

03/29/2009

Electronic Signature of Signing Officer or Director

_____ Date