

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084652

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Entity Name:** LAKE FOOT & ANKLE, P.A.

**Current Principal Place of Business:**

1330 CITIZENS BOULEVARD  
SUITE 301  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

1330 CITIZENS BOULEVARD  
SUITE 301  
LEESBURG, FL 34748 US

**New Mailing Address:**

**FEI Number:** 20-5086594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEBER, KARSTEN S DPM  
304 WATERS EDGE DRIVE  
LEESBURG, FL 34748 US

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

WEBER, KARSTEN S DPM  
1504 FAHNSTOCK STREET  
EUSTIS, FL 32726 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/24/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: WEBER, KARSTEN S DPM  
Address: 1504 FAHNSTOCK STREET  
City-St-Zip: EUSTIS, FL 32726 US

Title: D  
Name: WEBER, KARSTEN S DPM  
Address: 1504 FAHNSTOCK STREET  
City-St-Zip: EUSTIS, FL 32726 US

Title: VP  
Name: STIRLING, ALEXANDER A DPM  
Address: 3015 ETOWAH PARK BLVD  
City-St-Zip: TAVARES, FL 32778 US

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: KARSTEN S WEBER DPM

PRES

02/24/2011

Electronic Signature of Signing Officer or Director

Date