

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110062

FILED  
Jun 03, 2009  
Secretary of State

**Entity Name:** SOUTHEASTERN CENTER FOR INFECTIOUS DISEASES, P.A.

**Current Principal Place of Business:**

1213 TMH COURT  
STE A  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

1213 TMH COURT  
STE A  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 20-5417408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALTERS, DONNA MARIE  
227 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 323011805 US

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

FORD, PHILBERT J PSTD  
1213 THM COURT  
STE A  
TALLAHASSEE, FL 32308 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: PHILBERT J FORD

06/03/2009

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: PSTD ( ) Delete  
Name: FORD, PHILBERT J  
Address: 1213 TMH COURT, STE A  
City-St-Zip: TALLAHASSEE, FL 32308

**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: PHILBERT J FORD

PSTD

06/03/2009

Electronic Signature of Signing Officer or Director

Date