

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122736

Entity Name: WAYNE R. KOTZKER MD, P.A.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1111 NE 169TH TER
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

22179 PRIMROSE WAY
BOCA RATON, FL 33433

Current Mailing Address:

1111 NE 169TH TER
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

22179 PRIMROSE WAY
BOCA RATON, FL 33433

FEI Number: 20-5611479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOTZKER, WAYNE R
1111 NE 169TH TER
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

KOTZKER, WAYNE R
22179 PRIMROSE WAY
BOCA RATON, FL 33433 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: WAYNE R. KOTZKER

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KOTZKER, WAYNE R
Address: 1111 NE 169TH TER
City-St-Zip: NORTH MIAMI BEECH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KOTZKER, WAYNE R
Address: 22179 PRIMROSE WAY
City-St-Zip: BOCA RATON, FL 33433

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: WAYNE R. KOTZKER

PSD

04/29/2009

Electronic Signature of Signing Officer or Director

Date