

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000124080

Entity Name: JAMES R. CUMMINGS, M.D., P.A.

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

605 LAMAR AVENUE  
BROOKSVILLE, FL 34601 US

**New Principal Place of Business:**

**Current Mailing Address:**

605 LAMAR AVENUE  
BROOKSVILLE, FL 34601 US

**New Mailing Address:**

FEI Number: 59-3080457

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAM R. HUSEMAN, P.A.  
3733 UNIVERSITY BOULEVARD WEST  
SUITE 210B  
JACKSONVILLE, FL 32217 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: DIR  
Name: CUMMINGS, JAMES R  
Address: 605 LAMAR AVENUE  
City-St-Zip: BROOKSVILLE, FL 34601 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: JAMES R CUMMINGS

DIR

04/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date