2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000125830

Entity Name
 JUDY HARRISON, MD, PA



FILED Mar 07, 2008 08:00 A Secretary of State

Principal Place of Business

2474 RIVER PLACE LANE ORANGE PARK, FL 32073

Mailing Address

2474 RIVER PLACE LANE ORANGE PARK, FL 32073



DO NOT WRITE IN THIS SPACE

01242008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 20-5630523
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, JOHN CPA 1329 KINGSLEY AVE, STE D ORANGE PARK, FL 32073

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and title t	applicable (NOTE Re	igistered Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			Some and the state of the state	· 1854 · 1864 · 1875 · 1864 ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HARRISON, JUDY B 2474 RIVER PLACE LANE				03/25/08-80010-005\150.00
TITLE					

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Judy Harrison

3/5/08 904-264-15,