

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000125830

Entity Name: JUDY HARRISON, MD, PA

**FILED**  
**Jan 09, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

2474 RIVER PLACE LANE  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

2474 RIVER PLACE LANE  
ORANGE PARK, FL 32073

**New Mailing Address:**

FEI Number: 20-5630523      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NICHOLS, JOHN CPA  
1329 KINGSLEY AVE, STE D  
ORANGE PARK, FL 32073      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: P      ( ) Delete  
Name: HARRISON, JUDY B  
Address: 2474 RIVER PLACE LANE  
City-St-Zip: ORANGE PARK, FL 32073

**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: JUDY HARRISON MD

PRES

01/09/2009

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

\_\_\_\_\_ Date