2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2008
Secretary of State

DOCUMENT# P06000144437

Entity Name: THOMAS M. STEED, M.D., P.A.

Current Principal Place of Business:

415 WEST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US

New Principal Place of Business:

5001 S. UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 US

Current Mailing Address:

415 WEST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

5001 S. UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 US

FEI Number: 20-5894191 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOUTH FLORIDA TAX
415 WEST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

SOUTH FLORIDA TAX
5001 S. UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 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: SCOTT E ITKIN 09/09/2008
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: P ( ) Delete
Name: STEED, THOMAS M
Address: 415 WEST HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: STEED, THOMAS M
Address: 5001 S. UNIVERSITY DRIVE, STE B
City-St-Zip: DAVIE, FL 33328 US

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: THOMAS M. STEED P 09/09/2008
Electronic Signature of Signing Officer or Director Date