

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081303

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** RICARDO F. IZURIETA, MD, PA

**Current Principal Place of Business:**

425 N LEE STREET  
SUITE 202A  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

2 SHIRCLIFF WAY  
SUITE 120  
JACKSONVILLE, FL 32204 US

**Current Mailing Address:**

425 N LEE STREET  
SUITE 202A  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

2 SHIRCLIFF WAY  
SUITE 120  
JACKSONVILLE, FL 32204 US

**FEI Number:** 26-0549920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONAKEY & COMPANY LC  
11945 SAN JOSE BLVD  
SUITE 201  
JACKSONVILLE, FL 32223 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: MD  
Name: IZURIETA, RICARDO F  
Address: 2 SHIRCLIFF WAY, SUITE 120  
City-St-Zip: JACKSONVILLE, FL 32204 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: RICARDO F IZURIETA

MD

04/15/2010

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

\_\_\_\_\_ Date