

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000124671

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Entity Name:** LISBETH W. ROY, D.O., P.A.

**Current Principal Place of Business:**

1725 S.W. 5TH CT.  
FT. ALAUDERDALE, FL 33312

**New Principal Place of Business:**

915 MIDDLE RIVER DRIVE  
#303  
FT. LAUDERDALE, FL 33304

**Current Mailing Address:**

1725 S.W. 5TH CT.  
FT. ALAUDERDALE, FL 33312

**New Mailing Address:**

915 MIDDLE RIVER DRIVE  
#303  
FT. LAUDERDALE, FL 33304

**FEI Number:** 26-1442656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROY, LISBETH W DR.  
911 WEST WARREN AVENUE  
TAMPA, FL 33602 US

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

ROY, LISBETH W DR.  
915 MIDDLE RIVER DRIVE  
#303  
FT. LAUDERDALE, FL 33304 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:** LISBETH ROY, DO

03/31/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DR.  
**Name:** ROY, LISBETH W D.O.  
**Address:** 915 MIDDLE RIVER DRIVE, #303  
**City-St-Zip:** FT. LAUDERDALE, FL 33304

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:** LISBETH W. ROY, DO

PRES

03/31/2011

Electronic Signature of Signing Officer or Director

Date