2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# P08000044762

Entity Name: JONATHAN SANDERS, M.D., P.A.

Current Principal Place of Business:

140 SW CHAMBER CT SUITE 200
PORT ST LUCIE, FL 34986

New Principal Place of Business:

140 S.W. CHAMBER COURT, SUITE 200
PORT ST LUCIE, FL 34986 US

Current Mailing Address:

140 SW CHAMBER CT SUITE 200
PORT ST LUCIE, FL 34986

New Mailing Address:

140 S.W. CHAMBER COURT, SUITE 200
PORT ST LUCIE, FL 34986 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, JONATHAN MD
140 SW CHAMBER CT SUITE 200
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

SANDERS, JONATHAN MD
140 S.W. CHAMBER COURT, SUITE 200
PORT ST LUCIE, FL 34986 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: JONATHAN SANDERS, MD, REGISTERED AGENT 04/09/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SANDERS, JONATHAN MD
Address: 140 SW CHAMBER CT SUITE 200
City-St-Zip: PORT ST LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: SANDERS, JONATHAN MD
Address: 140 SW CHAMBER CT, SUITE 200
City-St-Zip: PORT ST LUCIE, FL 34986 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: JONATHAN SANDERS P 04/09/2009
Electronic Signature of Signing Officer or Director Date