

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000022050

FILED  
Feb 24, 2010  
Secretary of State

Entity Name: LONNIE PAULOS, M.D., P.A.

## Current Principal Place of Business:

5 PORTOFINO DRIVE  
TOWER 5, UNIT 2001  
PENSACOLA BEACH, FL 32561 US

## New Principal Place of Business:

## Current Mailing Address:

5 PORTOFINO DRIVE  
TOWER 5, UNIT 2001  
PENSACOLA BEACH, FL 32561 US

## New Mailing Address:

FEI Number: 87-0639681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAULOS, LONNIE  
5 PORTOFINO DRIVE  
TOWER 5, UNIT 2001  
PENSACOLA BEACH, FL 32561 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: PRES  
Name: PAULOS, LONNIE  
Address: 5 PORTOFINO DRIVE, TOWER 5, UNIT 2001  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: SEC  
Name: PAULOS, LONNIE  
Address: 5 PORTOFINO DRIVE, TOWER 5, UNIT 2001  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: DIR  
Name: PAULOS, LONNIE  
Address: 5 PORTOFINO DRIVE, TOWER 5, UNIT 2001  
City-St-Zip: PENSACOLA BEACH, FL 32561

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: LONNIE PAULOS

PRES

02/24/2010

Electronic Signature of Signing Officer or Director

Date