

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000093005

Entity Name: SHANNON FLOYD, DPM, P.A.

FILED
Mar 14, 2011
Secretary of State

Current Principal Place of Business:

3619 NE 207TH STREET #2305
AVENTURA, FL 33180

New Principal Place of Business:

4900 SW 46TH CT #2108
OCALA, FL 34474

Current Mailing Address:

3619 NE 207TH STREET #2305
AVENTURA, FL 33180

New Mailing Address:

4900 SW 46TH CT #2108
OCALA, FL 34474

FEI Number: 27-1372636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, MAX A ESQ.
1400 NW 10TH AVENUE PENTHOUSE III
MIAMI, FL 33136 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

OFFICERS AND DIRECTORS:

Title: D
Name: FLOYD, SHANNON P DPM
Address: 4900 SW 46TH CT #2108
City-St-Zip: OCALA, FL 34474

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: SHANNON FLOYD

DPM

03/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date