

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000091659

**FILED**  
**Jan 03, 2011**  
**Secretary of State**

**Entity Name:** KENNETH M. BARON, M.D., P.A.

**Current Principal Place of Business:**

9980 CENTRAL PARK BLVD. STE. 322  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

15340 JOG ROAD  
SUITE 203  
DELRAY BEACH, FL 33446

**New Mailing Address:**

**FEI Number:** 65-0523390

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARON, KENNETH M  
9980 CENTRAL BANK BLVD  
SUITE 322  
BOCA RATON, FL 33428 US

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

BARON, KENNETH M  
9980 CENTRAL PARK BLVD  
SUITE 322  
BOCA RATON, FL 33428 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:

Electronic Signature of Registered Agent

01/03/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BARON, KENNETH M M.D.  
Address: 9980 CENTRAL PARK BLVD. STE. 322  
City-St-Zip: BOCA RATON, FL 33428

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: KENNETH BARON

PRES

01/03/2011

Electronic Signature of Signing Officer or Director

Date