

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000005861

FILED  
Jan 21, 2010  
Secretary of State

Entity Name: MARIE A. HERRMANN, M.D., P.A.

**Current Principal Place of Business:**

226 N NOVA ROAD  
SUITE 393  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

1470 PECOS DR  
ORMOND BEACH, FL 32174 US

**Current Mailing Address:**

226 N NOVA ROAD  
SUITE 393  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

1470 PECOS DR  
ORMOND BEACH, FL 32174 US

FEI Number: 59-3299840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ISLER, CHARLES S. III  
434 MAGNOLIA AVENUE  
PANAMA CITY, FL 32401 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: DPST  
Name: HERRMANN, MARIE A  
Address: 1470 PECOS DR  
City-St-Zip: ORMOND BEACH, FL 32174

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: MARIE A. HERRMANN, M.D.

DPST

01/21/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date