

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000065501

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** DESTIN PLASTIC SURGERY, P.A.

**Current Principal Place of Business:**

4485 FURLING LANE  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

4485 FURLING LANE  
DESTIN, FL 32541

**New Mailing Address:**

**FEI Number:** 59-3331513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURDEN, WILLIAM R  
4485 FURLING LANE  
DESTIN, FL 32541 US

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

KEVIN M. HELMICH, P.A.  
4405 COMMONS DRIVE EAST  
SUITE 102  
DESTIN, FL 32541 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: KEVIN M. HELMICH, ESQ.

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BURDEN, WILLIAM R  
Address: 4485 FURLING LANE  
City-St-Zip: DESTIN, FL 32541

Title: D  
Name: ENNIS, LAWRENCE S  
Address: 4485 FURLING LANE  
City-St-Zip: DESTIN, FL 32541

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: LAWRENCE S. ENNIS

D

02/28/2011

Electronic Signature of Signing Officer or Director

Date