

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000021204

FILED
Feb 22, 2010
Secretary of State

Entity Name: SOUTH FLORIDA GASTROENTEROLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

1325 S CONGRESS AVE
SUITE 211 ~ ATT: LOU ROSSMAN
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

Current Mailing Address:

1325 S CONGRESS AVE
SUITE 211 ~ ATT: LOU ROSSMAN
BOYNTON BEACH, FL 33426 US

New Mailing Address:

FEI Number: 65-0736246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
1900 GLADES RD
SUITE 401
BOCA RATON, FL 33431 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: P
Name: MCGUIRE, DANIEL
Address: 6582 NW 33AVE
City-St-Zip: BOCA RATON, FL 33496 US

Title: P
Name: URBAN, MICHAEL
Address: 5801 NW 23 AVE
City-St-Zip: BOCA RATON, FL 33496 US

Title: D
Name: DOSCH, MARK R
Address: 4615 PINE TREE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: T&S
Name: BROMER, MATTHEW
Address: 11238 MISTY RIDGE WAY
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D
Name: ALALU, JAIME
Address: 2150 S OCEAN BLVD 28
City-St-Zip: DELRAY BEACH, FL 33483 US

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: MICHAEL URBAN

PRES

02/22/2010

Electronic Signature of Signing Officer or Director

Date