

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000065348

Entity Name: OPH/BOYNTON, INC.

FILED  
Feb 05, 2009  
Secretary of State

**Current Principal Place of Business:**

500 E BROWARD BLVD, STE 1950  
FORT LAUDERDALE, FL 33394

**New Principal Place of Business:**

**Current Mailing Address:**

500 E BROWARD BLVD, STE 1950  
FORT LAUDERDALE, FL 33394

**New Mailing Address:**

FEI Number: 65-0866488      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAMAWAY, MICHAEL P  
500 E BROWARD BLVD, STE 1950  
FORT LAUDERDALE, FL 33394      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: D      ( ) Delete  
Name: KAMELHAIR, STEVEN R  
Address: 7260 SW 7 ST  
City-St-Zip: PLANTATION, FL 33317

Title: D      ( ) Delete  
Name: NEMEROFSKY, STEPHEN L  
Address: 6121 BANYAN TERR  
City-St-Zip: PLANTATION, FL 33317

Title: D      ( ) Delete  
Name: ROLNICK, AUDIE M  
Address: 1210 NW 78TH AVE  
City-St-Zip: PLANTATION, FL 33322

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVEN R. KAMELHAIR

D

02/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date