2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098669

Entity Name: JACK E. BARON, M.D, P.A.

ENGLEWOOD, FL 34223

City-St-Zip:

FILED Mar 29, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1 DOMINIC ENGLEWO	CA DRIVE OOD, FL 3422	23			
Current Mailing Address:			New Mailing Address:		
1 DOMINIC ENGLEWO	CA DRIVE OOD, FL 3422	23			
FEI Number: 65-0882532 FEI Number Applied For ()			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
1 DOMINIO ENGLEWO	OOD, FL 3422		purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DR. (BARON, JACK 1 DOMINICA D ENGLEWOOD	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VSD (BARON, KATH 1 DOMINICA D		Title: Name: Address:	() Change () Addition	

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: KATHY SUSAN BARON VSD 03/29/2009