## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000045201

City-St-Zip:

GAINESVILLE, FL 32605

Entity Name: GAINESVILLE OTOLARYNGOLOGY GROUP, P.A.

FILED Feb 16, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
6821 N.W 11TH PLACE GAINESVILLE, FL 32605				6821 NW 11TH PLACE GAINESVILLE, FL 32605	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	11TH PLACE ILLE, FL 32605		6821 NW 11TH PLACE GAINESVILLE, FL 326	-	
FEI Number	: 59-3573729	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
203 N.E. 1	W, ELLEN R ST STREET ILLE, FL 32601	US			
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	gent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	rors:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	D () GERSHOW, JAI 2215 NW 24TH		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: JAMES A. GERSHOW D 02/16/2009