

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S12546

FILED
Apr 22, 2009
Secretary of State

Entity Name: OAKWOOD LAKES PODIATRY GROUP, P.A.

Current Principal Place of Business:

3695 BOYNTON BEACH BLVD
SUITE 4
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

3695 BOYNTON BEACH BLVD
SUITE 4
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 65-0225866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDMAN, HOWARD S.
116 SE 6TH COURT
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

FRIEDMAN, HOWARD S.
116 SE 6TH COURT
SUITE 700
FT LAUDERDALE, FL 33301 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: HOWARD FRIEDMAN

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATTISON, BRAD S., DR.
Address: 3695 BOYNTON BCH BVD #4
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: MATTISON, SUSAN B., DR.
Address: 3695 BOYNTON BCH BVD #4
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MATTISON, BRAD S., DR.
Address: 3695 BOYNTON BCH BVD #4
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP (X) Change () Addition
Name: MATTISON, SUSAN B., DR.
Address: 3695 BOYNTON BCH BVD #4
City-St-Zip: BOYNTON BEACH, FL 33436

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: BRAD MATTISON

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date