2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# S58361

Entity Name: FRANK BODENMILLER, M.D., P.A.

Current Principal Place of Business:

417 E JACKSON ST
ORLANDO, FL 32801

New Principal Place of Business:

736 N. MAGNOLIA AVE.
ORLANDO, FL 32803

Current Mailing Address:

417 E JACKSON ST.
ORLANDO, FL 32801

New Mailing Address:

736 N. MAGNOLIA AVE.
ORLANDO, FL 32803

FEI Number: 59-3070827 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BODENMILLER, FRANK
417 E JACKSON ST.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

BODENMILLER, FRANK
736 N. MAGNOLIA AVE.
ORLANDO, FL 32803 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: FRANK BODENMILLER 04/01/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BODENMILLER, FRANK,
Address: 417 E JACKSON ST.
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BODENMILLER, FRANK,
Address: 736 N. MAGNOLIA AVE.
City-St-Zip: ORLANDO, FL 32803

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: FRANK BODENMILLER D 04/01/2009
Electronic Signature of Signing Officer or Director Date