

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V03635

FILED  
Feb 09, 2010  
Secretary of State

Entity Name: SHAKTI NARAIN, M.D., P.A.

**Current Principal Place of Business:**

1070 FLAGLER AVE  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

1070 FLAGLER AVE  
LEESBURG, FL 34748 US

**New Mailing Address:**

FEI Number: 59-3106843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NARAIN, SHAKTI, M.D.  
1070 FLAGLER AVE  
LEESBURG, FL 34748 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  
Name: NARAIN, SHAKTI  
Address: 1070 FLAGLER AVE  
City-St-Zip: LEESBURG, FL

I hereby 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 all other like empowered.

SIGNATURE: SHAKTI NARAIN MD PA

D

02/09/2010

Electronic Signature of Signing Officer or Director

Date