2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# V13807

Entity Name: DENNIS FEINRIDER, M.D., P.A.

Current Principal Place of Business:

6801 LAKE WORTH RD #219
LAKE WORTH, FL 33467 US

New Principal Place of Business:

6801 LAKE WORTH RD
#219
LAKE WORTH, FL 33467 US

Current Mailing Address:

6801 LAKE WORTH RD #219
LAKE WORTH, FL 33467 US

New Mailing Address:

6801 LAKE WORTH RD
#219
LAKE WORTH, FL 33467 US

FEI Number: 65-0315640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FEINRIDER, DENNIS
911 HYACINTH DRIVE
DELRAY BEACH, FL 33483 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: DR. ( ) Delete
Name: FEINRIDER, DENNIS
Address: 911 HYACINTH DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
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: DENNIS FEINRIDER, MD OFFI 04/19/2009
Electronic Signature of Signing Officer or Director Date