

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V72655

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** DR. GARY D. ENKER, P.A.

**Current Principal Place of Business:**

6215 N FEDERAL HWY  
FT LAUDERDALE, FL 33308 US

**New Principal Place of Business:**

6215 N FEDERAL HWY.  
FT LAUDERDALE, FL 33308 US

**Current Mailing Address:**

6215 N FEDERAL HWY  
FT LAUDERDALE, FL 33308 US

**New Mailing Address:**

6215 N FEDERAL HWY.  
FT LAUDERDALE, FL 33308 US

FEI Number: 65-0368858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ENKER, GARY D  
7746 SOLIMAR CIR  
BOCA RATON, FL 33433 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

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: ENKER, GARY D  
Address: 7746 SOLIMAR CIRCLE  
City-St-Zip: BOCA RATON, FL 33433

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: GARY ENKER

DR

01/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date