

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000024813

Entity Name: RONALD C. FERNANDEZ, P.A.

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

31922 U.S. 19 NORTH  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

31922 U.S. 19 NORTH  
PALM HARBOR, FL 34684

**New Mailing Address:**

FEI Number: 59-3629890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERNANDEZ, MELANIE C  
1791 ROYAL OAK PLACE WEST  
DUNEDIN, FL 34698 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: PD  
Name: FERNANDEZ, RONALD C M.D.  
Address: 34041 U.S. 19 NORTH, STE. A  
City-St-Zip: PALM HARBOR, FL 34684

Title: ST  
Name: FERNANDEZ, MELANIE  
Address: 34041 U.S. 19 NORTH, STE. A  
City-St-Zip: PALM HARBOR, FL 34684

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: MELANIE FERNANDEZ

ST

04/04/2011

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

\_\_\_\_\_  
Date