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August 7, 2006

PERSONAL AND CONFIDENTIAL

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Central Florida Internists, Inc.
Document Number: P01000115312

Dear Sir or Madam:

Enclosed please find the original and one copy of a **Statement of Change of Registered Office or Registered Agent**, which we would appreciate your filing on behalf of the above corporation, together with our **check** in the amount of \$35.00 for the filing fee. Please return the copy to me, with your filing stamp, at the above address.

Thank you for your assistance.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Robert W. Mead, Jr.', with a large, sweeping flourish extending to the right.

Robert W. Mead, Jr.

RWM/kj
Enclosures

cc: Donna Khan
without enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Central Florida Internists, Inc.
2. The principal office address: 2918 17th Street, St. Cloud, Florida 34769
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/05/01 Document number: P01000115312

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Robert W. Mead, Jr.
800 North Magnolia Avenue, Suite 201
Orlando, Florida 32803

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Donna M. Khan
2918 17th Street
(P.O. Box NOT acceptable)
St. Cloud, Florida 34769

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Muhammad A. Khan
(Signature of an officer or director)

Muhammad A. Khan, M.D., President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Donna Khan
(Signature of Registered Agent)

August 2, 2006
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314