

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000023377

FILED
Feb 21, 2012
Secretary of State

Entity Name: THE MEDICAL CENTRE OF LEHIGH ACRES, INC

Current Principal Place of Business:

1303 HOMESTEAD ROAD NORTH
SUITE #102
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

1303 HOMESTEAD ROAD NORTH
SUITE #102
LEHIGH ACRES, FL 33936 US

New Mailing Address:

FEI Number: 27-2213206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RYBACK, RALPH S
1303 HOMESTEAD ROAD NORTH
SUITE #102
LEHIGH ACRES, FL 33936 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: P
Name: RYBACK, RALPH S MD
Address: 1303 HOMESTEAD ROAD NORTH, SUITE #102
City-St-Zip: LEHIGH ACRES, FL 33936 US

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: RALPH S RYBACK

P

02/21/2012

Electronic Signature of Signing Officer or Director

Date