

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000008714

Entity Name: ANITA PATEL M.D., PA

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10517 BROADLAND PASS  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

**Current Mailing Address:**

10517 BROADLAND PASS  
THONOTOSASSA, FL 33592

**New Mailing Address:**

FEI Number: 27-4808935

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, ANITA  
10517 BROADLAND PASS  
THONOTOSASSA, FL 33592 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: PATEL, ANITA  
Address: 10517 BROADLAND PASS  
City-St-Zip: THONOTOSASSA, FL 33592 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: ANITA PATEL

MD

03/09/2012

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

\_\_\_\_\_  
Date