

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000014988

FILED
Mar 31, 2011
Secretary of State

Entity Name: HOSPITAL INTERNAL MEDICINE, P.A.

Current Principal Place of Business:

1510 N.W. 107TH TERRACE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

1510 N.W. 107TH TERRACE
GAINESVILLE, FL 32606 US

Current Mailing Address:

2631 NW 41ST STREET
SUITE A
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3380987 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DOWNEY, KEVIN I
2631 N.W. 41ST ST.
SUITE B
GAINESVILLE, FL 32606 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: WILSON, CHARLES S M.D.
Address: 1510 NW 107TH TERRACE
City-St-Zip: GAINESVILLE, FL 32606

Title: VP
Name: FIGG, STEVEN
Address: 2801 NW 21 AVENUE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: D
Name: COCKEY, GEORGE H
Address: 8847 SW 12TH ROAD
City-St-Zip: GAINESVILLE, FL 326074961

Title: VP
Name: ZALDIVAR, CALIXTO
Address: 9804 NW 54 PLACE
City-St-Zip: GAINESVILLE, FL 326532843

Title: S
Name: KVERNELAND, KNUT JR MD
Address: 1711 NW 66TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: VP
Name: RAVULAPATI, AMITHA
Address: 6500 WEST NEWBERRY ROAD
City-St-Zip: GAINESVILLE, FL 32605 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: CHARLES WILSON MD

CEO

03/31/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date