

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071714

FILED  
Jan 09, 2011  
Secretary of State

Entity Name: ALBRECHT H. WOBST M.D., P.A.

**Current Principal Place of Business:**

36027 DEER CREEK DRIVE, #201  
ZEPHYRHILLS, FL 33541 US

**New Principal Place of Business:**

**Current Mailing Address:**

36027 DEER CREEK DRIVE, #201  
ZEPHYRHILLS, FL 33541 US

**New Mailing Address:**

FEI Number: 26-3108839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOBST, ALBRECHT H  
1636 NW 57TH ST  
GAINESVILLE, FL 32605 US

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

WOBST, ALBRECHT H  
7910 NORTH HIGHLAND AVENUE  
TAMPA, FL 33604 US

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

01/09/2011

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOBST, ALBRECHT H  
Address: 7990 NORTH HIGHLAND AVENUE  
City-St-Zip: TAMPA, FL 33604 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: ALBRECHT WOBST

CEO

01/09/2011

Electronic Signature of Signing Officer or Director

Date