

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000093614

Entity Name: C.F. GONZALEZ, M.D., P.A.

FILED
Feb 14, 2012
Secretary of State

Current Principal Place of Business:

7989 S SUNCOAST BLVD
HOMOSASSA, FL 34446

New Principal Place of Business:

7991 S SUNCOAST BLVD
HOMOSASSA, FL 34446

Current Mailing Address:

P.O. BOX 1940
HOMOSASSA SPRINGS, FL 34447

New Mailing Address:

7991 S SUNCOAST BLVD
HOMOSASSA, FL 34446

FEI Number: 59-3290127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VILLACASTIN, ALEX T MD
7989 S SUNCOAST BLVD
HOMOSASSA, FL 34446 US

Name and Address of New Registered Agent:

VILLACASTIN, ALEX T MD
2820 W. LANTANA DR.
BEVERLY HILLS, FL 34465 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: ALEX T. VILLACASTIN

02/14/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MGRM
Name: VILLACASTIN, ALEX T
Address: 2820 W. LANTANA DR.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: MGRM
Name: VILLACASTIN, MARIA N
Address: 2820 W. LANTANA DR.
City-St-Zip: BEVERLY HILLS, FL 34465

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: ALEX T VILLACASTIN

MGRM

02/14/2012

Electronic Signature of Signing Officer or Director

Date