

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121459

Entity Name: COLLEEN NIEDZWIECKI, MD PA

Current Principal Place of Business:

4657 AYRON TERRACE
PALM HARBOR, FL 34685

Current Mailing Address:

4657 AYRON TERRACE
PALM HARBOR, FL 34685

FEI Number: 80-0004700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIMARCO, ROBERT F
3444 EAST LAKE RD STE 412
PALM HARBOR, FL 34685 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

_____ Date

Officer/Director Detail :

Title DR
Name NIEDZWIECKI, COLLEEN
Address 4657 AYRON TERRACE
City-State-Zip: PALM HARBOR FL 34685

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: COLLEEN NIEDZWIECKI

DR

04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date