

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000076477

Entity Name: INTEGRATED MEDICAL DIRECTIONS, P.A.

Current Principal Place of Business:

1 COUNTRY ROAD EAST
VILLAGE OF GOLF, FL 33436

Current Mailing Address:

P.O. BOX 327
BOYNTON BEACH, FL 33425 US

FEI Number: 65-0541344

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LADNER, ANDREW D
1 COUNTRY ROAD EAST
VILLAGE OF GOLF, FL 33436 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 PD
Name LADNER, ANDREW D
Address 1 COUNTRY ROAD EAST
City-State-Zip: VILLAGE OF GOLF FL 33436

Title ST
Name LADNER, MARTHA A
Address 1 COUNTRY ROAD EAST
City-State-Zip: VILLAGE OF GOLF FL 33436

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: ANDREW D LADNER, MD

PRESIDENT

07/01/2013

Electronic Signature of Signing Officer/Director Detail

Date