

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 485481

FILED
Feb 18, 2011
Secretary of State

Entity Name: WAYNE H. CASE, M.D., P.A.

Current Principal Place of Business:

3410 WEST 84TH STREET
#110
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

3410 WEST 84TH STREET
#110
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 59-1618910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASE, WAYNE H
3410 WEST 84TH STREET, SUITE F110
HIALEAH, FL 33018 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: PTSD
Name: CASE, WAYNE H., M.D.
Address: 3410 WEST 84TH STREET, SUITE F110
City-St-Zip: HIALEAH, FL 33018

Title: V
Name: CASE-DIAZ, CHERYL
Address: 3410 WEST 84TH STREET, SUITE F110
City-St-Zip: HIALEAH, FL 33018

Title: S
Name: CASE, PATRICIA
Address: 3410 WEST 84TH STREET, SUITE F110
City-St-Zip: HIALEAH, FL 33018

Title: T
Name: CASE, PATRICIA
Address: 3410 WEST 84TH STREET, SUITE F110
City-St-Zip: HIALEAH, FL 33018

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: WAYNE H CASE

PTSD

02/18/2011

Electronic Signature of Signing Officer or Director

Date