

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 503027

FILED
Feb 02, 2010
Secretary of State

Entity Name: LADIA & LADIA, M.D.'S, P.A.

Current Principal Place of Business:

208 N.E. 19TH DR.
SUITE 5
OKEECHOBEE, FL 349721911

New Principal Place of Business:

208 N.E. 19TH DR.
SUITE 5
OKEECHOBEE, FL 34972

Current Mailing Address:

208 N.E. 19TH DR.
SUITE 5
OKEECHOBEE, FL 349721911

New Mailing Address:

208 N.E. 19TH DR.
SUITE 5
OKEECHOBEE, FL 34972

FEI Number: 59-1661515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LADIA, FELIPE P., M.D., P.A.
208 N.E. 19 DRIVE
SUITE #5
OKEECHOBEE, FL 33472 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: LADIA, FELIPE P.
Address: 208 N.E. 19 DR. STE #5
City-St-Zip: OKEECHOBEE, FL 34972

Title: SD
Name: LADIA, LILIA D.
Address: 208 N.E. 19 DR. STE #5
City-St-Zip: OKEECHOBEE, FL 34972

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: LILIA D. LADIA

SD

02/02/2010

Electronic Signature of Signing Officer or Director

Date