

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 520051

Entity Name: R. MARINO, M.D., P.A.

FILED
Mar 21, 2011
Secretary of State

Current Principal Place of Business:

555 W GRANADA
STE C-2
ORMOND BEACH, FL 32174

Current Mailing Address:

555 W GRANADA
STE C-2
ORMOND BEACH, FL 32174

New Principal Place of Business:

305 CLYDE MORRIS BLVD
STE 200
ORMOND BEACH, FL 32174

New Mailing Address:

305 CLYDE MORRIS BLVD
STE 200
ORMOND BEACH, FL 32174

FEI Number: 59-1715102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARINO, RALPH G.
555 W GRANADA BLVD
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

MARINO, RALPH G.
305 CLYDE MORRIS BLVD
STE 200
ORMOND BEACH, FL 32174 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

03/21/2011

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MARINO, RALPH G.
Address: 305 CLYDE MORRIS BLVD STE 200
City-St-Zip: ORMOND BEACH, FL 32174

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: RALPH G. MARINO, M.D., P.A.

MD

03/21/2011

Electronic Signature of Signing Officer or Director

Date