

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 545545

FILED
Apr 10, 2012
Secretary of State

Entity Name: MELBOURNE DERMATOLOGY CENTER - STEPHEN HORNELL, M.D., P.A.

Current Principal Place of Business:

333 E. SHERIDAN ROAD
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

333 E. SHERIDAN ROAD
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-1761147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORNELL, STEPHEN
106 SOUTHGATE BLVD.
MELBOURNE, FL 32901 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: PD
Name: HORNELL, STEPHEN
Address: 333 E. SHERIDAN RD.
City-St-Zip: MELBOURNE, FL 32901

Title: SD
Name: HORNELL, PAMELA
Address: 106 SOUTHGATE BLVD.
City-St-Zip: MELBOURNE, FL 32901

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: STEPHEN HORNELL

PRES

04/10/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date