

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 653892

FILED  
Jan 18, 2011  
Secretary of State

Entity Name: MICHAEL X. ROHAN, M.D., P.A.

**Current Principal Place of Business:**

408 WEST 19TH ST.  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

408 WEST 19TH ST.  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

FEI Number: 59-1968414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROHAN, DR MICHAEL X., P.A.  
408 W. 19TH ST.  
PANAMA CITY, FL 32405 US

**Name and Address of New Registered Agent:**

ROHAN, MICHAEL X., MD PA  
408 W. 19TH ST.  
PANAMA CITY, FL 32405 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: MICHAEL X. ROHAN MD PA

01/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ROHAN, MICHAEL X. MD  
Address: 408 W 19TH ST  
City-St-Zip: PANAMA CITY,, FL 32405 US

Title: VP  
Name: ROHAN, THELMA G  
Address: 239 S. COVE TERR. DR.  
City-St-Zip: PANAMA CITY, FL 32401 US

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: MICHAEL X. ROHAN MD

PRES

01/18/2011

Electronic Signature of Signing Officer or Director

Date