## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 655706** 

Entity Name: ALDOLFO C. DULAY, M.D., P.A.

FILED Feb 07, 2012 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business:   |
|--------------------------------------|------------------------------------|
| Current Finicipal Flace of Dusiness. | New Fillicipal Flace of Dusiliess. |

228 NE HANCOCK AVE MADISON, FL 32340

Current Mailing Address: New Mailing Address:

POB 934

MADISON, FL 32341

FEI Number: 59-1967576 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DULAY, ADOLFO C MD 228 NE HANCOCK AVE. MADISON, FL 32340 U

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:

Name: DULAY, ADOLFO C
Address: 228 NE HANCOCK AVENUE
City-St-Zip: MADISON, FL 32340

Title: S1

 Name:
 DULAY, ADOLFO C

 Address:
 228 NE HANCOCK AVENUE

 City-St-Zip:
 MADISON, FL 32340

Title: D

Name: DULAY, MARIA L Address: 228 NE HANCOCK AVE City-St-Zip: MADISON, FL 32340

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: MARIA L. DULAY D 02/07/2012