

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729773

FILED
Jan 05, 2012
Secretary of State

Entity Name: MEDICAL ARTS CENTER OF ORANGE PARK ASSOCIATION, INC.

Current Principal Place of Business:

2140 KINGSLEY AVE
SUITE #14
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

2140 KINGSLEY AVE
SUITE #14
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-1877176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EFRON, BARRY
2140 KINGSLEY AVENUE
SUITE 12
ORANGE PARK, FL 32073 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: EFRON, BARRY
Address: 2140 KINGSLEY AVE
City-St-Zip: ORANGE PARK, FL 32073

Title: STD
Name: RIFKIN, KERRY V
Address: 2140 KINGSLEY AVENUE
City-St-Zip: ORANGE PARK, FL 32073

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KERRY V. RIFKIN

STD

01/05/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date