

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747312

FILED
Mar 15, 2011
Secretary of State

Entity Name: THOMAS H. WALLIS M.D., MEDICAL CENTER ASSOCIATION, INC.

Current Principal Place of Business:

40 SW 12TH STREET
OCALA, FL 34471 US

New Principal Place of Business:

Current Mailing Address:

2120 SW 22 PLACE
C202
OCALA, FL 34474 US

New Mailing Address:

2120 SW 22 PLACE
OCALA, FL 34471 US

FEI Number: 59-2041410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROW, CHESTER J
21 N. MAGNOLIA AVENUE
2ND FLOOR
OCALA, FL 34475 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: VP
Name: TORRES, RAMON
Address: 2120 SW 22 PLACE
City-St-Zip: Ocala, FL 34471

Title: SEC
Name: BALD, CHRISTOPHER
Address: 2120 SW 22 PL
City-St-Zip: Ocala, FL 34471

Title: PRES
Name: CUNNINGHAM, DAVID
Address: 2120 SW 22 PLACE
City-St-Zip: Ocala, FL 34471

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: CHRISTOPHER BALD, MD

MP

03/15/2011

Electronic Signature of Signing Officer or Director

Date