

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03282

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** ROBERT J. VALINS, D.P.M., P.A.

**Current Principal Place of Business:**

6326 FORT KING RD  
ZEPHYRHILLS, FL 33542

**New Principal Place of Business:**

**Current Mailing Address:**

GELBER & COMPANY  
11450 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025

**New Mailing Address:**

6326 FORT KING RD  
ZEPHYRHILLS, FL 33542

**FEI Number:** 59-2035990

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VALINS, ROBERT J  
6326 FORT KING ROAD  
ZEPHYRHILLS, FL 33542 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: DPM  
Name: VALINS, ROBERT J  
Address: 6326 FORT KING ROAD  
City-St-Zip: ZEPHYRHILLS, FL 33542

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: ROBERT VALINS

DPM

01/30/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date