

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002217

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** BRUNSWICK CARDIOLOGY, P.C. INC.

**Current Principal Place of Business:**

19261 LA SERENA DRIVE  
FORT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN M. WICKER  
PO DRAWER 60205  
FORT MYERS, FL 33906

**New Mailing Address:**

C/O JOHN M. WICKER, P.A.  
PO DRAWER 60205  
FORT MYERS, FL 33906

**FEI Number:** 56-1776208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICKER, JOHN M ESQ  
12670 NEW BRITTANY BLVD., STE 101  
FORT MYERS, FL 33907 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: DPST  
Name: SEDER, JEFFREY D  
Address: 19261 LA SERENA DRIVE  
City-St-Zip: FORT MYERS, FL 33967

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: JEFFREY D. SEDER

DPST

04/28/2011

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

\_\_\_\_\_  
Date