

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J43076

FILED
Apr 25, 2012
Secretary of State

Entity Name: MEDICAL PULMONARY ASSOCIATES, P.A.

Current Principal Place of Business:

6610 N UNIVERSITY DR
#120
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 8831
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-2743831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZEIGER, TONEL, M.D.
6610 N, UNIVERSITY DR
120
TAMARAC, FL 33321 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: ZEIGER, TONEL, MD
Address: 6610 N UNIVERSITY DR
City-St-Zip: TAMARAC, FL 33321

Title: VD
Name: WEINER, DOUGLAS MD
Address: 1776 NW 124TH WAY
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S
Name: STREIT, BARRY
Address: 4211 NW 101 DRIVE
City-St-Zip: CORAL SPRINGS, FL

Title: T
Name: LIEBER, CHARLES
Address: 6610 N. UNIVERSITY DR
City-St-Zip: TAMARAC, FL 33321

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: TONEL ZEIGER

PD

04/25/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date