

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J70389

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** LINDA F. DELO, D.O., P.A.

**Current Principal Place of Business:**

514 SE PORT ST. LUCIE BLVD.  
PORT ST LUCIE, FL 34984 US

**New Principal Place of Business:**

**Current Mailing Address:**

514 SE PORT ST. LUCIE BLVD.  
PORT ST LUCIE, FL 34984 US

**New Mailing Address:**

FEI Number: 59-2836179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DELO, LINDA F  
514 SE PORT ST LUCIE BLVD.  
PORT ST LUCIE, FL 34984 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: DP  
Name: DELO, LINDA F.  
Address: 7309 S INDIAN RIVER DR  
City-St-Zip: FT PIERCE, FL 34982

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: LINDA F. DELO

DR.

01/04/2011

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

\_\_\_\_\_ Date