

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L92174

FILED
Feb 15, 2010
Secretary of State

Entity Name: PALMS WEST OB/GYN ASSOCIATES, P.A.

Current Principal Place of Business:

12953 PALMS WEST DRIVE
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470

New Principal Place of Business:

12953 PALMS WEST DR
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470

Current Mailing Address:

12953 PALMS WEST DRIVE
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470

New Mailing Address:

12953 PALMS WEST DR
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470

FEI Number: 65-0214458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDESCRUZ, RAUL C
12953 PALM WEST DRIVE
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

VALDESCRUZ, RAUL C
12953 PALM WEST DR
SUITE 101 BLDG 6
LOXAHATCHEE, FL 33470 US

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:

02/15/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: VALDESCRUZ, RAUL C
Address: 12953 PALMS WEST DR, SUITE 101 BLDG 6
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V
Name: KORNSTEIN, MARCOS
Address: 12953 PALMS WEST DR, SUITE 101 BLDG 6
City-St-Zip: LOXAHATCHEE, FL 33470

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: RAUL C VALDESCRUZ

P

02/15/2010

Electronic Signature of Signing Officer or Director

Date