

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005648

FILED
Jan 06, 2010
Secretary of State

Entity Name: KAZAKH AMERICAN MEDICAL PARTNERSHIP, INC.

Current Principal Place of Business:

3752 BOBBIN MILL ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

3752 BOBBIN MILL ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 26-2092060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SNIDER, ROBERT M
3752 BOBBIN MILL ROAD
TALLAHASSEE, FL 32312 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: D
Name: COX, THOMAS L
Address: 2519 CHAMBERLIN DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: MCDANIEL, WILLIAM W
Address: 2010 DOOMAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: SNIDER, ROBERT MD
Address: 3752 BOBBIN MILL ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: SNIDER, MATTHEW N
Address: 3752 BOBBIN MILL ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: WILSON, BRYAN
Address: 1014 LOTHIAN DRIVE
City-St-Zip: TALLAHASSEE, FL 323122837

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: L THOMAS COX, JR.

D

01/06/2010

Electronic Signature of Signing Officer or Director

Date