

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 19, 2011
Secretary of State

Entity Name: FLORIDA MEDICAL PROFESSIONALS GROUP, INC.

Current Principal Place of Business:

5331 COMMERCIAL WAY
SUITE 104
SPRING HILL, FL 34606

New Principal Place of Business:

23546 SR 54
LUTZ, FL 33559

Current Mailing Address:

5331 COMMERCIAL WAY
SUITE 104
SPRING HILL, FL 34606

New Mailing Address:

23546 SR 54
LUTZ, FL 33559

FEI Number: 65-0332117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE MOMENTO GROUP LLC
1503 ATAMI COURT
WESLEY CHAPEL, FL 33544 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: PRES
Name: SEIKEL, STACY M.D.
Address: 1118 S ORANGE AVE, SUITE 202
City-St-Zip: ORLANDO, FL 32806

Title: TRES
Name: GOSS, HEIDI DVM
Address: 5740 WESLEY BROOK DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33545

Title: SEC
Name: EUSTACE, JOHN MD
Address: 9000 SW 87TH COURT, #103
City-St-Zip: MIAMI, FL 33176

Title: IDAA
Name: SYFERT, MARYBETH
Address: 2616 NW 25TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: MEMB
Name: ANTONEK, THOMAS C PH. D.
Address: 7909 GRASMERE DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: MEMB
Name: SEELY, RICHARD MD
Address: 1835 MAIN STREET, SUITE 101
City-St-Zip: WESTON, FL 33326

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: STACY SEIKEL

PRES

04/19/2011

Electronic Signature of Signing Officer or Director

Date