2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2011
Secretary of State

DOCUMENT# P00000003357

Entity Name: HERNANDO FAMILY PRACTICE CENTER, INC.

Current Principal Place of Business:

10507 SPRING HILL DR
SPRING HILL, FL 34608

New Principal Place of Business:

Current Mailing Address:

10507 SPRING HILL DR
SPRING HILL, FL 34608

New Mailing Address:

FEI Number: 59-3620057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMARCHAND, LINGAPPA
10507 SPRING HILL DRIVE
SPRING HILL, FL 34608 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: DPT
Name: AMARCHAND, LINGAPPA DR.
Address: 10507 SPRING HILL DR
City-St-Zip: SPRING HILL, FL 34608

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: LA PRE 03/16/2011

Electronic Signature of Signing Officer or Director Date