

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005009

FILED
Jan 04, 2011
Secretary of State

Entity Name: NIEBLES & SAMTER, M.D.S, P.A.

Current Principal Place of Business:

10649 N. FLORIDA AVE.
SUITE 13
TAMPA, FL 33612

New Principal Place of Business:

10549 N. FLORIDA AVE.
SUITE B
TAMPA, FL 33612

Current Mailing Address:

10649 N. FLORIDA AVE.
SUITE 13
TAMPA, FL 33612

New Mailing Address:

10549 N. FLORIDA AVE.
SUITE B
TAMPA, FL 33612

FEI Number: 59-3618517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALKER, GARY
202 SOUTH ROME AVENUE
SUITE 100
TAMPA, FL 33606 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: DR.
Name: NIEBLES, JACQUELINE M.D.
Address: 10549 N. FLORIDA AVE., SUITE B
City-St-Zip: TAMPA, FL 33612

Title: DR
Name: SAMTER, JORDAN M.D.
Address: 10549 N. FLORIDA AVE., SUITE B
City-St-Zip: TAMPA, FL 33612

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: JACQUELINE M. NIEBLES

DIR

01/04/2011

Electronic Signature of Signing Officer or Director

Date