

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009385

FILED
Apr 29, 2010
Secretary of State

Entity Name: NORTH FLORIDA INTERNAL MEDICINE AND PEDIATRICS, INC.

Current Principal Place of Business:

3790 COASTAL HIGHWAY
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

3790 COASTAL HIGHWAY
ST. AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 59-3622949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BHIDE, VANDANA Y
3790 COASTAL HIGHWAY
ST. AUGUSTINE, FL 32084 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: BHIDE, VANDANA Y
Address: 3790 COASTAL HIGHWAY
City-St-Zip: ST. AUGUSTINE, FL 32084

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: VANDANA BHIDE

PRES

04/29/2010

Electronic Signature of Signing Officer or Director

Date