## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000012572

Entity Name: VERA ENDOCRINE ASSOCIATES, INC

FILED Jan 12, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 1667 NORTH CLYDE MORRIS BLVD. STE 2 DAYTONA BEACH, FL 32117 **Current Mailing Address: New Mailing Address:** 1667 NORTH CLYDE MORRIS BLVD. STE 2 DAYTONA BEACH, FL 32117 FEI Number: 59-3622303 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VERA, ARNOLD MD 1667 N CLYDE MORRIS BLVD STE 2 DAYTONA BEACH, FL 32117 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: [

Name: VERA, ARNOLD MD,MSC

Address: 1667 N CLYDE MORRIS BLVD STE 2

City-St-Zip: DAYTONA BEACH, FL 32117

Title: VP

Name: VERA, ANNY B

Address: 1667 NORTH CLYDE MORRIS BLVD. STE 2

City-St-Zip: DAYTONA BEACH, FL 32117

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: ARNOLD VERA M.D., M.SC., F.A.C.E., C.D.E.

**PRES** 

01/12/2011