

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010924

FILED
Feb 16, 2011
Secretary of State

Entity Name: TRINA E. ESPINOLA, M.D., P.A.

Current Principal Place of Business:

625 6TH AVENUE S.
SUITE 385
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

625 6TH AVENUE S.
SUITE 385
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-3694640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FELIX, MARK R MANAGER
625 6TH AVENUE S.
SUITE 385
ST. PETERSBURG, FL 33701 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: P
Name: ESPINOLA, TRINA E MD
Address: 625 6TH AVENUE S., SUITE 385
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP
Name: ESPINOLA, TRINA E MD
Address: 625 6TH AVENUE S., SUITE 385
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: T
Name: ESPINOLA, TRINA E MD
Address: 625 6TH AVENUE S., SUITE 385
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S
Name: ESPINOLA, TRINA E MD
Address: 625 6TH AVENUE S, SUITE 385
City-St-Zip: SAINT PETERSBURG, FL 33701

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: TRINA E. ESPINOLA, MD

P

02/16/2011

Electronic Signature of Signing Officer or Director

Date