

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012619

FILED
Mar 24, 2011
Secretary of State

Entity Name: JOLITA KLEMENTAVICIENE, M.D., P.A.

Current Principal Place of Business:

1118 GULF BREEZE PARKWAY
205
GULF BREEZE, FL 32561 US

New Principal Place of Business:

1118 GULF BREEZE PARKWAY
205
GULF BREEZE, FL 32561 US

Current Mailing Address:

1118 GULF BREEZE PARKWAY
205
GULF BREEZE, FL 32561 US

New Mailing Address:

1118 GULF BREEZE PARKWAY
205
GULF BREEZE, FL 32561 US

FEI Number: 59-3702462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEMENTAVICIENE, JOLITA MD
1118 GULF BREEZE PARKWAY
205
GULF BREEZE, FL 32561 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: KLEMENTAVICIENE, JOLITA M.D.
Address: 1118 GULF BREEZE PARKWAY , SUITE 205
City-St-Zip: GULF BREEZE, FL 32561

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: JOLITA KLEMENTAVICIENE

P

03/24/2011

Electronic Signature of Signing Officer or Director

Date