

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000122171

FILED
Feb 01, 2011
Secretary of State

Entity Name: M.D. SERVICES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

6705 GREEN ISLAND CIRCLE
LAKE WORTH, FL 334637004 70

New Principal Place of Business:

Current Mailing Address:

6705 GREEN ISLAND CIRCLE
LAKE WORTH, FL 334637004 70

New Mailing Address:

FEI Number: 90-0004595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUKEMAN, MARLENE
6705 GREEN ISLAND CIRCLE
LAKE WORTH, FL 334637004 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: DP
Name: DUKEMAN, MARLENE
Address: 6705 GREEN ISLAND CIRCLE
City-St-Zip: LAKE WORTH, FL 334637004

Title: VP
Name: DUKEMAN, SIDNEY G
Address: 6705 GREEN ISLAND CIRCLE
City-St-Zip: LAKE WORTH, FL 33463 US

Title: TRES
Name: HUFF, ROBYN
Address: 17493 N. 48TH COURT
City-St-Zip: LOXAHATCHEE, FL 33470

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: MARLENE DUKEMAN

PRES

02/01/2011

Electronic Signature of Signing Officer or Director

Date