2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2011
Secretary of State

DOCUMENT# P02000060650

Entity Name: COLLIER PODIATRY, P.A.

Current Principal Place of Business:

1715 HERITAGE TRAIL
SUITE 204
NAPLES, FL 34112

New Principal Place of Business:

1715 HERITAGE TRAIL
SUITE 204
NAPLES, FL 34112 US

Current Mailing Address:

1715 HERITAGE TRAIL
SUITE 204
NAPLES, FL 34112

New Mailing Address:

1715 HERITAGE TRAIL
SUITE 204
NAPLES, FL 34112 US

FEI Number: 01-0733526 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETROCELLI, MICHAEL J
1715 HERITAGE TRAIL, SUITE 204
NAPLES, FL 34112 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: DR
Name: PETROCELLI, MICHAEL J
Address: 1715 HERITAGE TRAIL, SUITE 204
City-St-Zip: NAPLES, FL 34112 US

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: MICHAEL J PETROCELLI DR 01/16/2011

Electronic Signature of Signing Officer or Director Date