

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060822

FILED
Apr 02, 2012
Secretary of State

Entity Name: LINDA MAYNARD, M.D., P.A.

Current Principal Place of Business:

1901 FLOYD STREET
SUITE 301
SARASOTA, FL 34239

New Principal Place of Business:

1339 MAHAN DR
TALLAHASSEE, FL 32308

Current Mailing Address:

1901 FLOYD STREET
SUITE 301
SARASOTA, FL 34239

New Mailing Address:

1339 MAHAN DR
TALLAHASSEE, FL 32308

FEI Number: 04-3679236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYNARD, LINDA M.D.
5239 Highbury Circle
SARASOTA, FL 34238 US

Name and Address of New Registered Agent:

MAYNARD, LINDA M.D.
1400 VILLAGE SQUARE BLVD
SUITE3-236
TALLAHASSEE, FL 32312 US

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:

04/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MAYNARD, LINDA M.D.
Address: 1400 VILLAGE SQUARE BLVD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP,S
Name: MAYNARD, LINDA M.D.
Address: 1400 VILLAGE SQUARE BLVD
City-St-Zip: TALLAHASSEE, FL 32312

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: LINDA MAYNARD, MD

P

04/02/2012

Electronic Signature of Signing Officer or Director

Date