

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000074958

Entity Name: C. GUROL ERBAY, M.D., P.A.

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7109 NW 11TH PLACE  
SUITE B  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

7109 NW 11TH PLACE  
SUITE B  
GAINESVILLE, FL 32605

**New Mailing Address:**

FEI Number: 56-2282234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ERBAY, C. GUROL  
7109 NW 11TH PLACE  
STE B  
GAINESVILLE, FL 32605 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: ERBAY, C. GUROL  
Address: 9838 SW 37TH RD  
City-St-Zip: GAINESVILLE, FL 32608

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: CELAL GUROL ERBAY

MD

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date