

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077714

Entity Name: MICHAEL N. NEWTON MD, PA

FILED
Mar 14, 2011
Secretary of State

Current Principal Place of Business:

14523 BRUCE B DOWNS BLVD.
401
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

P O BOX 46056
TAMPA, FL 33646

New Mailing Address:

P O BOX 46037
TAMPA, FL 33646

FEI Number: 04-3766017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWTON, MICHAEL N MD
14523 BRUCE B DOWNS BLVD
SUITE 401
TAMPA, FL 33613 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: PD
Name: NEWTON, MICHAEL N MD
Address: P O BOX 46037
City-St-Zip: TAMPA, FL 33646

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 N NEWTON

PD

03/14/2011

Electronic Signature of Signing Officer or Director

Date