2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003845

Name:

Address:

City-St-Zip:

Entity Name: COLIN M. MCKINNEY, D.M.D., P.A.

MCKINNEY, PATRICIA H

24 SABAL ISLAND DRIVE OCEAN RIDGE, FL 33435 FILED Apr 28, 2011 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 500 NW DIXIE HWY 200 STUART, FL 34994 **Current Mailing Address: New Mailing Address:** 1681 CROSSINGS CIRCLE PALM CITY, FL 34990 FEI Number: 20-0549350 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCKINNEY, COLIN M 1143 SW WILDRIDGE CT PALM CITY, FL 34990 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: MCKINNEY, COLIN M Name: 1143 SW WILDRIDGE CT Address: City-St-Zip: PALM CITY, FL 34990 Title: VΡ

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: COLIN MCKINNEY DR. 04/28/2011