

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000114120

Entity Name: W. ANDREW HODGE, M.D., P.A.

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5500 MILITARY TRAIL  
# 22-273  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

5500 MILITARY TRAIL  
# 22-273  
JUPITER, FL 33458

**New Mailing Address:**

FEI Number: 20-1451831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOPASKY, MARK  
2401 PGA BLVD  
#196-24  
PALM BEACH GARDENS, FL 33410 US

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

LOPASKY, MARK  
1080 E. INDIANTOWN RD  
STE 104-A  
JUPITER, FL 33477 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:

Electronic Signature of Registered Agent

04/27/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D, P  
Name: HODGE, W. ANDREW MD, PA  
Address: 5500 MILITARY TRAIL, #22-273  
City-St-Zip: JUPITER, FL 33458

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: W ANDREW HODGE, D/PRES

Electronic Signature of Signing Officer or Director

D/P

04/27/2011

Date