

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000031354

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Entity Name:** JOHN A. HEINBOCKEL, M.D., P.A.

**Current Principal Place of Business:**

2112 SE 15TH LANE  
OCALA, FL 344714124

**New Principal Place of Business:**

**Current Mailing Address:**

2112 SE 15TH LANE  
OCALA, FL 344714124

**New Mailing Address:**

**FEI Number:** 20-2533617

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEINBOCKEL, JOHN A  
3309 SW 34TH CIR  
SUITE 101  
OCALA, FL 34474 US

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

HEINBOCKEL, JOHN A  
2112 SE 15TH LANE  
OCALA, FL 34471 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:** JOHN A. HEINBOCKEL

04/03/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PST  
**Name:** HEINBOCKEL, JOHN A  
**Address:** 2112 SE 15TH LANE  
**City-St-Zip:** Ocala, FL 34471

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:** JOHN A HEINBOCKEL

PST

04/03/2012

Electronic Signature of Signing Officer or Director

Date