

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090776

FILED
Apr 25, 2011
Secretary of State

Entity Name: TOWN CENTER FAMILY PRACTICE, P.A.

Current Principal Place of Business:

1043 TOWN CENTER DRIVE
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1043 TOWN CENTER DRIVE
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 84-1684357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALKI, GERORGE
1539 CHERRY LAKE WAY
HEATHROW, FL 32746 US

Name and Address of New Registered Agent:

MALKI, GERORGE
1038 HENLEY DOWNS PL
HEATHROW, FL 32746 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

04/25/2011

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MALKI, GEORGE
Address: 1043 TOWN CENTER DRIVE.
City-St-Zip: ORANGE CITY, FL 32763

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: GEORGE MALKI

PRES

04/25/2011

Electronic Signature of Signing Officer or Director

Date