2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2011
Secretary of State

DOCUMENT# P05000107308

Entity Name: MONDELLO FAMILY CLINIC, P.A.

Current Principal Place of Business:

28149 US HWY 27
DUNDEE, FL 33838

New Principal Place of Business:

Current Mailing Address:

28149 US HWY 27
DUNDEE, FL 33838

New Mailing Address:

FEI Number: 20-3216565 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONDELLO, CHRISTOPHER
28149 US HWY 27
DUNDEE, FL 33838 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: PSTV
Name: MONDELLO, CHRISTOPHER
Address: 1023 DUNDEE RD
City-St-Zip: DUNDEE, FL 33838

Title: D
Name: MONDELLO, CHRISTOPHER
Address: 1023 DUNDEE RD
City-St-Zip: DUNDEE, FL 33838

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: CHRISTOPHER MONDELLO PSTV 02/25/2011

Electronic Signature of Signing Officer or Director Date