

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000043452

**FILED**  
**Feb 13, 2011**  
**Secretary of State**

**Entity Name:** RICARDO S. DELGADO, M.D., P.A.

**Current Principal Place of Business:**

34041 US HIGHWAY 19 N  
SUITE B  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

1009 CHATHAM CT  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

**FEI Number:** 20-4695835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCNAMARA, THOMAS P  
2907 BAY TO BAY BOULEVARD  
SUITE 201  
TAMPA, FL 33629 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:** D  
**Name:** DELGADO, RICARDO S M.D.  
**Address:** 1009 CHATHAM CT  
**City-St-Zip:** SAFETY HARBOR, FL 34695

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:** RICARDO S DELGADO, MD

PRES

02/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date