

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021325

FILED
Mar 03, 2010
Secretary of State

Entity Name: FLORIDA KIDNEY & HYPERTENSION CLINIC, INC.

Current Principal Place of Business:

705 FERRIS STREET
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

2140 KINGSLEY AVE
STE 10
ORANGE PARK, FL 32073

Current Mailing Address:

705 FERRIS STREET
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

2140 KINGSLEY AVE
STE 10
ORANGE PARK, FL 32073

FEI Number: 42-1758442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THAMBUGANIPALLE, JAYAPRASAD
705 FERRIS STREET
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

THAMBUGANIPALLE, JAYAPRASAD
2140 KINGSLEY AVE
STE 10
ORANGE PARK, FL 32073 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: JAYAPRASAD THAMBUGANIPALLE

03/03/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: THAMBUGANIPALLE, RAMA M.D.
Address: 2140 KINGSLEY AVE, STE 10
City-St-Zip: ORANGE PARK, FL 32073

Title: VP
Name: THAMBUGANIPALLE, JAYAPRASAD
Address: 2140 KINGSLEY AVE, STE 10
City-St-Zip: ORANGE PARK, FL 32073

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: JAYAPRASAD THAMBUGANIPALLE

VP

03/03/2010

Electronic Signature of Signing Officer or Director

Date