

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000043241

FILED
Apr 30, 2009
Secretary of State

Entity Name: FLORIDA KIDNEY DISEASE & HYPERTENSION CENTER, P.A.

Current Principal Place of Business:

150 2ND AVENUE NORTH
SUITE 1100
ST. PETERSBURG, FL 33701

New Principal Place of Business:

3221 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

Current Mailing Address:

150 2ND AVENUE NORTH
SUITE 1100
ST. PETERSBURG, FL 33701

New Mailing Address:

3221 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

FEI Number: 26-2531333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, THOMAS B
150 2ND AVENUE NORTH
SUITE 1100
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

SMITH, TOM B
150 2ND AVENUE NORTH
SUITE 1100
ST. PETERSBURG, FL 33701 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: TOM B. SMITH, ESQUIRE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PANKHANIYA, ROHIT
Address: 150 2ND AVENUE NORTH #1100
City-St-Zip: ST. PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PANKHANIYA, ROHIT
Address: 3221 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROHIT L. PANKHANIYA, M.D.

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date