2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2012
Secretary of State

DOCUMENT# P08000047593

Entity Name: TROPICAL FAMILY MEDICINE ASSOCIATES, P.A.

Current Principal Place of Business:

2002 DEL PRADO BLVD
SUITE # 102
CAPE CORAL, FL 33990 US

New Principal Place of Business:

2002 DEL PRADO BLVD S.
SUITE # 102
CAPE CORAL, FL 33990 US

Current Mailing Address:

P.O. BOX 151517
CAPE CORAL, FL 33915 US

New Mailing Address:

FEI Number: 26-2596991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SEWELL, ERICA A
2801 SW 25TH AVE
CAPE CORAL, FL 33914 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: P
Name: SEWELL, ERICA A
Address: 2801 SW 25TH AVE
City-St-Zip: CAPE CORAL, FL 33914 US

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: ERICA SEWELL P 04/13/2012

Electronic Signature of Signing Officer or Director Date