

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000051447

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** WEST COAST NEPHROLOGY, INC.

**Current Principal Place of Business:**

5781 49TH STREET N  
ST. PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

5781 49TH STREET N  
ST. PETERSBURG, FL 33709

**New Mailing Address:**

FEI Number: 26-2375783

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, BHAGWAT D  
5781 49TH STREET N  
ST. PETERSBURG, FL 33709 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: PATEL, BHAGWAT D M.D.  
Address: 5781 49TH STREET N  
City-St-Zip: ST. PETERSBURG, FL 33709

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: BHAGWAT D PATEL, MD

PRES

01/06/2012

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

\_\_\_\_\_ Date