

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068688

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: SRINIVAS DONTINENI, MD, PA

## Current Principal Place of Business:

1007 BEVERLY DRIVE  
ROCKLEDGE, FL 32955 US

## New Principal Place of Business:

6047 INDIGO CROSSING DRIVE  
ROCKLEDGE, FL 32955 US

## Current Mailing Address:

1007 BEVERLY DRIVE  
ROCKLEDGE, FL 32955 US

## New Mailing Address:

PO BOX 560059  
ROCKLEDGE, FL 329560059 US

FEI Number: 90-0403142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DONTINENI, SRINIVAS  
6047 INDIGO CROSSING DR  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

DONTINENI, SRINIVAS R  
6047 INDIGO CROSSING DR  
ROCKLEDGE, FL 32955 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: SRINIVAS R DONTINENI

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DONTINENI, SRINIVAS  
Address: 6047 INDIGO CROSSING DR  
City-St-Zip: ROCKLEDGE, FL 32955 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition  
Name: DONTINENI, SRINIVAS R  
Address: 6047 INDIGO CROSSING DR  
City-St-Zip: ROCKLEDGE, FL 32955 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: SRINIVAS R DONTINENI

DR

04/20/2009

Electronic Signature of Signing Officer or Director

Date