

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000010358

FILED
Feb 28, 2011
Secretary of State

Entity Name: GENESIS MEDICAL CENTER CORAL SPRINGS, INC.

Current Principal Place of Business:

3000 N. UNIVERSITY DRIVE
R
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3000 N. UNIVERSITY DRIVE
R
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 26-4175702 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GREEN, MITCHELL F
4000 HOLLYWOOD BOULEVARD
SUITE 485
CORAL SPRINGS, FL 33071 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: MANN, AJAIB
Address: 334 NW 120TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D
Name: WADHWA, MUKESH
Address: 9513 KENLEY COURT
City-St-Zip: PARKLAND, FL 33076

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: AJAIB MANN, M.D. _____

Electronic Signature of Signing Officer or Director

D

02/28/2011

_____ Date