

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000072482

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Entity Name:** KIDSVILLE PEDIATRICS V, P.A.

**Current Principal Place of Business:**

1050 W CARROLL ST  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

1050 W CARROLL ST  
KISSIMMEE, FL 34741

**New Mailing Address:**

P.O. BOX 452223  
KISSIMMEE, FL 34745

**FEI Number:** 27-0811936

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PANTOJA, VICTOR M  
1050 W CARROLL ST  
KISSIMMEE, FL 34741 US

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

PANTOJA, VICTOR M JR  
1050 W CARROLL ST  
KISSIMMEE, FL 34741 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: VICTOR M. PANTOJA JR.

03/22/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: GONZALEZ, FRANCELIS I  
Address: PO BOX 452223  
City-St-Zip: KISSIMMEE, FL 34745

Title: PRES  
Name: PANTOJA, VICTOR M JR  
Address: PO BOX 452223  
City-St-Zip: KISSIMMEE, FL 34745

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: FRANCELIS I. GONZALEZ MD

CEO

03/22/2010

Electronic Signature of Signing Officer or Director

Date