

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000020913

Entity Name: PM PEDIATRIC PLACE, M.D., P.A.

FILED  
Apr 25, 2011  
Secretary of State

**Current Principal Place of Business:**

1338 WEST FLETCHER AVE  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

1338 WEST FLETCHER AVE  
TAMPA, FL 33612

**New Mailing Address:**

FEI Number: 80-0569623      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COUNTRYMAN, JOHN A  
16011 NEBRASKA AVE NORTH  
SUITE 106  
LUTZ, FL 33549 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: DIP  
Name: JOHNSON-TOWSON, MICHELE  
Address: 1006 OXBRIDGE DRIVE  
City-St-Zip: LUTZ, FL 335499396

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: MICHELE JOHNSON-TOWSON

Electronic Signature of Signing Officer or Director

P

04/25/2011

Date