

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000074974

Entity Name: NGUYEN VU, M.D., P.A.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1656 S VOLUSIA AVE  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

1656 S VOLUSIA AVE  
ORANGE CITY, FL 32763

**New Mailing Address:**

FEI Number: 90-0757477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARR, JASON L ESQ  
1326 S RIDGEWOOD AVE SUITE 1  
DAYTONA BEACH, FL 32114 US

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

VU, NGUYEN D MD  
1656 S VOLUSIA AVE  
ORANGE CITY, FL 32763 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: NGUYEN VU

04/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VU, NGUYEN M.D.  
Address: 1656 S VOLUSIA AVE  
City-St-Zip: ORANGE CITY, FL 32763

Title: O  
Name: VAN, HA T D.C.  
Address: 1656 S VOLUSIA AVE  
City-St-Zip: ORANGE CITY, FL 32763

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: NGUYEN VU

P

04/28/2012

Electronic Signature of Signing Officer or Director

Date