

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000096474

FILED
Jan 19, 2012
Secretary of State

Entity Name: PLANTATION PRIMARY CARE PHYSICIANS, INC.

Current Principal Place of Business:

499 NW 70 AVENUE, SUITE 220
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

499 NW 70 AVENUE, SUITE 220
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 45-3764127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGLAS, PAULINE
499 NW 70 AVENUE, SUITE 220
PLANTATION, FL 33317 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: P/D
Name: DOUGLAS, PAULINE
Address: 499 NW 70 AVENUE, SUITE 220
City-St-Zip: PLANTATION, FL 33317

Title: STD
Name: RICHARDS, HELEN
Address: 499 NW 70 AVENUE, SUITE 220
City-St-Zip: PLANTATION, FL 33317

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: PAULINE DOUGLAS

P/D

01/19/2012

Electronic Signature of Signing Officer or Director

Date