

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076634

FILED
Feb 04, 2011
Secretary of State

Entity Name: MEDICAL ASSOCIATES OF CENTRAL FLORIDA, P.A.

Current Principal Place of Business:

1110 DRUID CIRCLE
LAKE WALES, FL 33853 US

New Principal Place of Business:

Current Mailing Address:

1110 DRUID CIRCLE
LAKE WALES, FL 33853 US

New Mailing Address:

FEI Number: 59-3202432 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLAM, MAHESH G M.D.
2418 WILDWOOD COURT
WINTER HAVEN, FL 33884 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: DR
Name: ALLAM, MAHESH G MD
Address: 2418 WILDWOOD COURT
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: MGR
Name: ALLAM, TANIA C
Address: 2418 WILDWOOD COURT
City-St-Zip: WINTER HAVEN, FL 33884

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: MAHESH ALLAM

MGR

02/04/2011

Electronic Signature of Signing Officer or Director

Date