

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000016463

FILED
Jan 30, 2009
Secretary of State

Entity Name: HEARTLAND PEDIATRICS ASSOCIATION OF WAUCHULA, P.A.

Current Principal Place of Business:

1125 S. 6TH AVE.
WAUCHULA, FL 33873

New Principal Place of Business:

Current Mailing Address:

1125 S. 6TH AVE.
WAUCHULA, FL 33873

New Mailing Address:

FEI Number: 65-0467720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOLLUM, JAMES F
129 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

SWAINE, ROBERT S
425 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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: ROBERT S. SWAINE

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SONNI, RAJESWARI M.D.
Address: 1125 S. 6TH AVE.
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: MANIK, APURBA M.D.
Address: 1125 SOUTH 6TH AVE
City-St-Zip: WAUCHULA, FL 33873

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANIK, APURBA M.D.
Address: 1125 S. 6TH AVE.
City-St-Zip: WAUCHULA, FL 33873

Title: S (X) Change () Addition
Name: SACHDEV, SHILPA M.D.
Address: 1125 SOUTH 6TH AVE
City-St-Zip: WAUCHULA, FL 33873

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: APURBA MANIK

P

01/30/2009

Electronic Signature of Signing Officer or Director

Date