

## **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000016463

**FILED**  
**May 27, 2011**  
**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:**

120 HEARTLAND WAY  
WAUCHULA, FL 33873

**Current Mailing Address:**

1125 S. 6TH AVE.  
WAUCHULA, FL 33873

**New Mailing Address:**

120 HEARTLAND WAY  
WAUCHULA, FL 33873

**FEI Number:** 65-0467720

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWAINE, ROBERT S  
425 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870 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: PS  
Name: MANIK, APURBA M.D.  
Address: 125 HEARTLAND WAY  
City-St-Zip: WAUCHULA, FL 33873

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: APURBA MANIK

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05/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date