

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 04, 2011
Secretary of State

Entity Name: DONNA H. KLEBAN, M.D., F.A.C.S, P.A.

Current Principal Place of Business:

1395 S STATE ROAD 7
SUITE 410
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

1395 S STATE ROAD 7
SUITE 410
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 65-0483020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEBAN, DONNA H M.D.
612 CYPRESS GREEN CIRCLE
WELLINGTON, FL 33414 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
Name: KLEBAN, DONNA H M.D.
Address: 1395 STATE ROAD 7, SUITE 410
City-St-Zip: WELLINGTON, FL 33414

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: DONNA H KLEBAN MD, FACS

PRES

04/04/2011

Electronic Signature of Signing Officer or Director

Date