

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000074880

FILED
Apr 28, 2011
Secretary of State

Entity Name: FAMILY INTERNAL MEDICINE, P.A.

Current Principal Place of Business:

5804 LAKE UNDERHILL RD
SUITE C
ORLANDO, FL 32807 US

New Principal Place of Business:

Current Mailing Address:

9013 SOUTHERN BREEZE DR.
ORLANDO, FL 32836

New Mailing Address:

5804 LAKE UNDERHILL RD
SUITE C
ORLANDO, FL 32807 US

FEI Number: 59-3272284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDDY, RAM
9013 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836 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: REDDY, RAM K.M.D.
Address: 9013 SOUTHERN BREEZE DR.
City-St-Zip: ORLANDO, FL 32836

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: RAM REDDY

PRES

04/28/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date