2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2012
Secretary of State

DOCUMENT# P95000051504

Entity Name: DR. DALE WICKSTROM-HILL, P.A.

Current Principal Place of Business:

WINTER HAVEN HOSPITAL
200 AVE. F, NE
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9499
WINTER HAVEN, FL 33883 US

New Mailing Address:

FEI Number: 59-3325855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WICKSTROM-HILL, DALE DR
200 AVE. F,NE
WINTER HAVEN, FL 33881 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: WICKSTROM-HILL, DALE DR.
Address: 200 AVE. F.,NE
City-St-Zip: WINTER HAVEN, FL 33881

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: DALE WICKSTROM-HILL, P.A. D.O 04/02/2012

Electronic Signature of Signing Officer or Director Date