

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000050087

FILED
Apr 27, 2012
Secretary of State

Entity Name: WEST FLORIDA MEDICAL ASSOCIATES, P.A.

Current Principal Place of Business:

3400 N LECANTO HIGHWAY
SUITE A
BEVERLY HILLS, FL 34465

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 640573
BEVERLY HILLS, FL 34464

New Mailing Address:

FEI Number: 59-3411454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMAR, MARIANANDA P M.D.
3400 N LECANTO HIGHWAY
SUITE A
BEVERLY HILLS, FL 34465 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: D
Name: KUMAR, MARIANANDA P M.D.
Address: 3400 N LECANTO HIGHWAY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: P
Name: BHADRESH, PATEL K M.D.
Address: 3775 N LECANTO HIGHWAY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VP
Name: PATEL, SHIRISH G M.D.
Address: 2669 N FLORIDA AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: S
Name: LI, CHARLES G M.D.
Address: 7647 W GULF TO LAKE HIGHWAY
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: T
Name: VILLACASTIN, ALEX M.D.
Address: 10489 N FLORIDA AVENUE
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: D
Name: ULHAS, DEVEN M.D.
Address: 11707 N. WILLIAMS ST.
City-St-Zip: DUNNELLON, FL 34432

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: BHADRESH K PATEL

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date