

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000000100

FILED
Apr 21, 2011
Secretary of State

Entity Name: PHYSICIANS INDEPENDENT MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

5755 HOOVER BOULEVARD
TAMPA, FL 336345340 US

New Principal Place of Business:

5755 HOOVER BOULEVARD
TAMPA, FL 33634 US

Current Mailing Address:

5755 HOOVER BOULEVARD
TAMPA, FL 336345340 US

New Mailing Address:

5755 HOOVER BOULEVARD
TAMPA, FL 33634

FEI Number: 59-3503777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

COHEN, JESSICA ESQ
5755 HOOVER BOULEVARD
TAMPA, FL 33634 US

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: JESSICA COHEN

04/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PAUTLER, KEITH M.D.
Address: 5755 HOOVER BOULEVARD
City-St-Zip: TAMPA, FL 33634 US

Title: VP
Name: BOGGIO, RAUL M.D.
Address: 5755 HOOVER BOULEVARD
City-St-Zip: TAMPA, FL 33634 US

Title: S/T
Name: VITKO, JULIE M.D.
Address: 5755 HOOVER BOULEVARD
City-St-Zip: TAMPA, FL 33634 US

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: KEITH PAUTLER, M.D.

PRES

04/21/2011

Electronic Signature of Signing Officer or Director

Date