

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008784

FILED
Feb 21, 2011
Secretary of State

Entity Name: BUFFALO MEDICAL CENTER, INC.

Current Principal Place of Business:

508 W. DR. MARTIN LUTHER KING, JR
STE B
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

508 W. DR. MARTIN LUTHER KING, JR
STE B
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-3489197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OGUNTEBI, FEHINTOLA
109 N ARMENIA AVE
TAMPA, FL 33609 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: METZGER, TAIWO W
Address: 508 W. DR. MARTIN LUTHER KING, JR. STE. B
City-St-Zip: TAMPA, FL 33603

Title: VP
Name: METZGER, OLD W
Address: 1433 SOUTH KIRKMAN RD #2051
City-St-Zip: ORLANDO, FL 32811

Title: S
Name: METZGER, K W
Address: 734 WILHAM STREET
City-St-Zip: NEWARK, NJ 02029

Title: T
Name: METZGER, W D
Address: 21622 WYTHEVILLE WAY
City-St-Zip: LUTZ, FL 33549

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: TAIWO METZGER

D

02/21/2011

Electronic Signature of Signing Officer or Director

Date