

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000031642

Entity Name: A.K. REDDY, MD, P.A.

FILED  
Jan 25, 2011  
Secretary of State

**Current Principal Place of Business:**

4446 E FLETCHER AVE  
E  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

4446 E FLETCHER AVE  
E  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 59-3503564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REDDY, ANOOP  
4446 E FLETCHER AVE  
E  
TAMPA, FL 33613 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, ANOOP  
Address: 4446 E FLETCHER AVE, SUITE E  
City-St-Zip: TAMPA, FL 33613 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: SHAILA REDDY

ADM

01/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date