

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000073036

FILED
Jan 18, 2011
Secretary of State

Entity Name: BRANDON AREA PRIMARY CARE, P.A.

Current Principal Place of Business:

500 VONDERBURG DR WEST, STE 311
BRANDON, FL 33511

New Principal Place of Business:

500 VONDERBURG DRIVE
SUITE 311W
BRANDON, FL 33511

Current Mailing Address:

500 VONDERBURG DR WEST STE 311
BRANDON, FL 33511

New Mailing Address:

500 VONDERBURG DRIVE
SUITE 311W
BRANDON, FL 33511

FEI Number: 59-3529151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKS, STEPHEN D MD
500 VANDERBURG DRIVE, SUITE 311 WEST
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

PARKS, STEPHEN D MD
500 VANDERBURG DRIVE
SUITE 311W
BRANDON, FL 33511 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:

01/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: PARKS, STEPHEN D M.D.
Address: 500 VONDERBURG DRIVE, SUITE 311W
City-St-Zip: BRANDON, FL 33511

Title: VP
Name: STIBICH, JASON C M.D.
Address: 500 VONDERBURG DRIVE, SUITE 311W
City-St-Zip: BRANDON, FL 33511

Title: S
Name: GOODMAN, LISA
Address: 500 VONDERBURG DRIVE, SUITE 311W
City-St-Zip: BRANDON, FL 33511

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: STEPHEN D. PARKS, M.D.

P

01/18/2011

Electronic Signature of Signing Officer or Director

Date