

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000084990

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** DINESH KHANNA, M.D., P.A.

**Current Principal Place of Business:**

1580 SANTA BARBARA BOULEVARD  
THE VILLAGES, FL 32162

**New Principal Place of Business:**

**Current Mailing Address:**

1580 SANTA BARBARA BOULEVARD  
THE VILLAGES, FL 32162

**New Mailing Address:**

**FEI Number:** 59-3538029

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KHANNA, DINESH MD  
1580 SANTA BARBARA BOULEVARD  
THE VILLAGES, FL 32162 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:** KHANNA, DINESH MD  
**Address:** 1580 SANTA BARBARA BOULEVARD  
**City-St-Zip:** THE VILLAGES, FL 32162

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:** DINESH KHANNA

P

03/22/2012

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

\_\_\_\_\_  
Date