2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020723

Entity Name: KIMMEL CARE FAMILY PRACTICE P.A.

FILED May 25, 2012 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
SUITE B	VICKHAM RD. RNE, FL 32935	i		
Current Mailing Address:			New Mailing Address:	
SUITE B	VICKHAM RD. RNE, FL 32935			
FEI Number	r: 59-3567746	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
683 LOG(MURRAY A GERHEAD ISLA 'E BEACH, FL			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Age	ent	Date
OFFICER	S AND DIREC	TORS:		
Title: Name:	P KIMMEL, MURF	RAY A		

Address:

683 LOGGERHEAD ISLAND DR City-St-Zip: SATELLITE BEACH, FL 32937

Title:

Name: KIMMEL, MICHELLE

683 LOGGERHEAD ISLAND DR Address: SATELLITE BEACH, FL 32937 City-St-Zip:

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: MICHELLE KIMMEL VΡ 05/25/2012