

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000033743

FILED
Apr 20, 2011
Secretary of State

Entity Name: MARGATE FAMILY MEDICAL CENTER, INC.

Current Principal Place of Business:

3113 NORTH STATE RD 7
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

3113 NORTH STATE RD 7
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0912575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANDRASEKARAN, VASANTHI
3113 NORTH STATE ROAD 7
MARGATE, FL 33063 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: CHANDRASEKARAN, VASANTHI
Address: 3113 NORTH STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

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: VASANTHI CHANDRASEKARAN

MD

04/20/2011

Electronic Signature of Signing Officer or Director

Date