2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2010
Secretary of State

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Entity Name: KELLY, WOLF & HERMAN, M.D., P.A.

Current Principal Place of Business:

8940 N. KENDALL DRIVE
SUITE 903-E
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8940 N. KENDALL DRIVE
SUITE 903-E
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0965636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KRAMER, ROBERT M
4000 HOLLYWOOD BLVD.
SUITE 485 SOUTH
HOLLYWOOD, FL 33021 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DR
Name: WOLF, CARLOS L M.D.
Address: 8940 N. KENDALL DRIVE SUITE 903-E
City-St-Zip: MIAMI, FL 33176

Title: DR
Name: HERMAN, BRAD P M.D.
Address: 8940 N. KENDALL DRIVE SUITE 903-E
City-St-Zip: MIAMI, FL 33176

Title: DR
Name: KELLY, MICHAEL E M.D.
Address: 8940 N. KENDALL DRIVE SUITE 903-E
City-St-Zip: MIAMI, FL 33176

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: SUSAN COPPOLA ACCT 02/22/2010

Electronic Signature of Signing Officer or Director Date