

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S18536

FILED
Feb 20, 2011
Secretary of State

Entity Name: KARL D. JONES, M.D., P.A.

Current Principal Place of Business:

5800 49TH ST N
SUITE 206 SOUTH
ST PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

5800 49TH ST N
SUITE 206 SOUTH
ST PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: 59-3039393 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NEUKAMM, JOHN
305 S BOULEVARD
TAMPA, FL 33606 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: M.D.
Name: JONES, KARL D. M.D., PA
Address: 5800 49TH ST N., SUITE 206S
City-St-Zip: ST PETERSBURG, FL 33709

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: KARL D JONES M.D.

_____ Electronic Signature of Signing Officer or Director

M.D.

02/20/2011

_____ Date