

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S19882

FILED
May 21, 2009
Secretary of State

Entity Name: PROGRESSIVE PEDIATRICS OF ORLANDO, P.A.

Current Principal Place of Business:

521 W SR 434
SUITE 101
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

PO BOX 520879
LONGWOOD, FL 32752

New Mailing Address:

FEI Number: 59-3042689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIRELES, ALFONSO
521 W STATE ROAD, SUITE 101
LONGWOOD, FL 32750 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIRELES, ALFONSO
Address: 521 W SR 434 STE 101
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANE C. MIRELES

RN

05/21/2009

Electronic Signature of Signing Officer or Director

Date