

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40864

FILED  
May 29, 2011  
Secretary of State

**Entity Name:** FELIX J. HERNANDEZ, M.D., P.A.

**Current Principal Place of Business:**

4500 CENTRAL AVE.  
SAINT PETERSBURG, FL 33711

**New Principal Place of Business:**

**Current Mailing Address:**

4500 CENTRAL AVE.  
SAINT PETERSBURG, FL 33711

**New Mailing Address:**

FEI Number: 59-3086471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HERNANDEZ, FELIX J.  
2150 49TH ST. NO.  
S-D  
ST. PETERSBURG, FL 33710 US

**Name and Address of New Registered Agent:**

HERNANDEZ, FELIX J.  
4500 CENTRAL AVE.  
ST. PETERSBURG, FL 33711 US

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: FELIX J. HERNANDEZ MD , PA

05/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MD  
Name: HERNANDEZ, FELIX J.  
Address: 4500 CENTRAL AVE  
City-St-Zip: SAINT PETERSBURG, FL 33711

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: FELIX J. HERNANDEZ, MD , PA

MD,

05/29/2011

Electronic Signature of Signing Officer or Director

Date