## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S45867

FILED Feb 27, 2012 Secretary of State

Entity Name: PULMONARY MEDICINE OF VENICE, P.A.

**New Principal Place of Business: Current Principal Place of Business:** 219 PALERMO PL VENICE, FL 34285 **Current Mailing Address: New Mailing Address:** 219 PALERMO PL VENICE, FL 34285 FEI Number: 59-3060573 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARENTS, DONALD N JR 219 PALÉRMO PL VENICE, FL 34285 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:

 Name:
 ARENTS, DONALD N JR.

 Address:
 219 PALERMO PL

 City-St-Zip:
 VENICE, FL 34285

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: DONALD N ARENTS JR P 02/27/2012