

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01039

FILED
Apr 25, 2012
Secretary of State

Entity Name: PLANT CITY INTERNAL MEDICINE SPECIALISTS, P.A.

Current Principal Place of Business:

1907 SOUTH ALEXANDER STREET
SUITE 1
PLANT CITY, FL 33566 US

New Principal Place of Business:

Current Mailing Address:

1907 SOUTH ALEXANDER STREET
SUITE 1
PLANT CITY, FL 33566 US

New Mailing Address:

FEI Number: 59-3121564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, STEVE
1907 SOUTH ALEXANDER STREET
SUITE 1
PLANT CITY, FL 33566 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: D
Name: SMITH, STEVE DR
Address: 1907 SOUTH ALEXANDER STREET SUITE 1
City-St-Zip: PLANT CITY, FL 33566 US

Title: D
Name: BERCHELMANN, CHRISTOPHER DR
Address: 1907 SOUTH ALEXANDER STREET SUITE 1
City-St-Zip: PLANT CITY, FL 33566 US

Title: D
Name: HOPKINS, SHEYLA N DR
Address: 1907 SOUTH ALEXANDER STREET SUITE 1
City-St-Zip: PLANT CITY, FL 33566 US

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: DR CHRISTOPHER BERCHELMANN

D

04/25/2012

Electronic Signature of Signing Officer or Director

Date