

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000098275

Entity Name: MEDICAL IPA OF THE PALM BEACHES, INC.

Current Principal Place of Business:

1410 ROYAL PALM BEACH BLVD
STE A
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

250 S. CENTRAL BOULEVARD
SUITE 207
JUPITER, FL 33458

FEI Number: 65-0851056

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMERLINCK, ROBERT D
1410 ROYAL PALM BEACH BLVD
SUITE A
ROYAL PALM BEACH, FL 33411 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name STECHSCHULTE, WILLIAM DO
Address 1410 ROYAL PALM BEACH BLVD
City-State-Zip: WEST PALM BEACH FL 33411

Title V
Name MARTINEZ, JOSE MD
Address 3319 STATE ROAD 7, # 215
City-State-Zip: WELLINGTON FL 33449

Title V
Name CAMERLINCK, ROBERT D
Address 250 S. CENTRAL BOULEVARD, SUITE 207
City-State-Zip: JUPITER FL 33458

Title P
Name ALIKAN, AHMED MD
Address 5055 S CONGRESS AVE STE 303
City-State-Zip: LAKE WORTH FL 33461

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: ROBERT D. CAMERLINCK

V

04/10/2013

Electronic Signature of Signing Officer/Director Detail

Date