

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V11426

**Entity Name:** BAY GERIATRICS, P.A.

**Current Principal Place of Business:**

4905 34TH ST S  
SUITE 303  
SAINT PETERSBURG, FL 33711

**Current Mailing Address:**

4905 34TH ST S  
SUITE 303  
SAINT PETERSBURG, FL 33711

**FEI Number:** 65-0309446

**Certificate of Status Desired:** No

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

FRASER, MALCOLM DR  
4905 34TH ST S,  
SUITE 303  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PSTS  
Name FRASER, MALCOLM R.  
Address 4905 34TH ST S, SUITE 303  
City-State-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:** MALCOLM R FRASER

P

01/26/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date