

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102444

FILED  
Jul 02, 2008  
Secretary of State

Entity Name: GENTLE MEDICINE ASSOCIATES, INC.

## Current Principal Place of Business:

1260 SOUTH FEDERAL HIGHWAY  
SUITE 202  
BOYNTON BEACH, FL 33435

## New Principal Place of Business:

202 SE 23 RD AVE  
BOYNTON BEACH, FL 33435

## Current Mailing Address:

1260 SOUTH FEDERAL HIGHWAY  
SUITE 202  
BOYNTON BEACH, FL 33435

## New Mailing Address:

202 SE 23 RD AVE  
BOYNTON BEACH, FL 33435

FEI Number: 65-1051594

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

VACHON-BATAILLE, REGINE  
1260 S. FEDERAL HIGHWAY, STE. 202  
BOYNTON BEACH, FL 33435 US

## Name and Address of New Registered Agent:

VACHON-BATAILLE, REGINE  
202 SE 23 RD AVE  
BOYNTON BEACH, FL 33435 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: REGINE V BATAILLE

07/02/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: BATAILLE, REGINE V  
Address: 1260 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T ( ) Delete  
Name: BATAILLE, GARY  
Address: 1260 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: BATAILLE, REGINE V  
Address: 202 SE 23 RD AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T (X) Change ( ) Addition  
Name: BATAILLE, GARY  
Address: 202 SE 23 RD AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: REGINE V BATAILLE

PSD

07/02/2008

Electronic Signature of Signing Officer or Director

Date