

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000042131

Entity Name: ACCIDENT & MEDICAL WALK-IN CLINIC, INC.

Current Principal Place of Business:

20205 CORTEZ BLVD.
BROOKSVILLE, FL 34601

Current Mailing Address:

20205 CORTEZ BLVD.
BROOKSVILLE, FL 34601

FEI Number: 59-3644811

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GALBRAITH, BARRY WD.O.
20205 CORTEZ BLVD.
BROOKSVILLE, FL 34601 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 PRES
Name GALBRAITH, BARRY WD.O.
Address 20205 CORTEZ BLVD.
City-State-Zip: BROOKSVILLE FL 34601

Title S
Name GALBRAITH, PATRICIA A
Address 20205 CORTEX BLVD.
City-State-Zip: BROOKSVILLE FL 34601

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: PATRICIA A. GALBRAITH

SECRETARY

02/17/2014

Electronic Signature of Signing Officer/Director Detail

Date