

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 374905

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: PHYSICIANS INVESTMENTS CORP.

## Current Principal Place of Business:

350 MARY ST. APT. E  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

350 MARY ST.  
SUITE E  
PUNTA GORDA, FL 33950

## Current Mailing Address:

C/O MARK HANSON  
350 MARY STREET, APT E  
PUNTA GORDA, FL 33950

## New Mailing Address:

C/O MARK HANSON  
350 MARY STREET, SUITE E  
PUNTA GORDA, FL 33950

FEI Number: 59-1364648

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANSON, MARK  
350 MARY ST. APT. E  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

HANSON, MARK  
350 MARY ST. SUITE. E  
PUNTA GORDA, FL 33950 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:

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HANSON, MARK  
Address: 350 MARY STREET, STE E  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPS ( ) Delete  
Name: TADALAN, LOUDES,  
Address: P.O. BOX 511446  
City-St-Zip: PUNTA GORDA, FL 33951

Title: TS ( ) Delete  
Name: LEVY, KENNETH  
Address: 350 MARY ST  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPS ( ) Delete  
Name: BERMUNDEZ, ZAIDA  
Address: 350 MARY STREET, STE A  
City-St-Zip: PUNTA GORDA, FL 33950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPTS (X) Change ( ) Addition  
Name: LEVY, KENNETH  
Address: 350 MARY ST  
City-St-Zip: PUNTA GORDA, FL 33950

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KENNETH LEVY

VPTS

02/17/2009

Electronic Signature of Signing Officer or Director

Date