## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 600701** 

FILED Jan 14, 2009 Secretary of State

Entity Name: MOLINA, BURKETT, CHAUHAN, WHEELEY AND FINK, M.D., P.A.

Current Principal Place of Business:	New Principal Place of Business:
1459 CAPTAINS WALK A FORT PIERCE, FL 34950	
Current Mailing Address:	New Mailing Address:
POST OFFICE BOX 2609 FORT PIERCE, FL 349542609	
FEI Number: 59-1225753 FEI Number Applied For() FEI Nu	mber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
REDDY, KAMBAM R M.D. 1459A CAPTAINS WALK FORT PIERCE, FL 34950 US	
The above named entity submits this statement for the purpose on the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PSTD () Delete  Name: REDDY, KAMBAM R M.D.  Address: 1459A CAPTAINS WALK  City-St-Zip: FORT PIERCE, FL 34950	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: KAMBAM REDDY PSTD 01/14/2009