2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2010
Secretary of State

DOCUMENT# 675393

Entity Name: ALLERGY ASSOCIATES OF THE PALM BEACHES, P.A.

Current Principal Place of Business:

840 US 1 STE 235
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

840 US 1 STE 235
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 59-2004475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STEIN, MARK R
840 US 1, STE. 235
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST
Name: STEIN, MARK R
Address: 840 US HWY ONE
City-St-Zip: N. PALM BEACH, FL

Title: D
Name: STEIN, MARK R
Address: 840 US HWY ONE
City-St-Zip: N. PALM BEACH, FL

Title: VP
Name: STEIN, MARK R
Address: 840 U.S. HWY ONE
City-St-Zip: NORTH PALM BEACH, FL

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: MARK R. STEIN, M,D. PRES 03/29/2010

Electronic Signature of Signing Officer or Director Date