

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719919

FILED
Feb 05, 2009
Secretary of State

Entity Name: MORSE BOULEVARD PROFESSIONAL CENTER, INC.

Current Principal Place of Business:

800 WEST MORSE BLVD
SUITE 1
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P O BOX 1328
WINTER PARK, FL 32790 US

New Mailing Address:

FEI Number: 59-1324598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURRAH, KENNETH F
800 W. MORSE BLVD
STE 1
WINTER PARK, FL 32789 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

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: MURRAH, KENNETH F,
Address: 800 W MORSE BLVD., STE. 1
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: ROTATORI, D. SCOTT
Address: 800 W MORSE BLVD., STE. 5
City-St-Zip: WINTER PARK, FL 32789

Title: PD () Delete
Name: HAWLEY, MALCOLM E,
Address: 800 W MORSE BLVD., STE. 3
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: TILLERY, DON E JR
Address: 800 W MORSE BLVD., STE. 2
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: HAND, THOMAS B.,
Address: 800 W MORSE BLVD STE 3
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: HU, VANFEI
Address: 800 W MORSE BLVD STE 3
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH F. MURRAH

ST

02/05/2009

Electronic Signature of Signing Officer or Director

Date