2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006139

Entity Name: COASTAL CLINICAL AND MANAGEMENT SERVICES, INC.

FILED Jan 26, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Principal Place of Business:	New Fillicipal Flace of Business:

33 ROCK HILL ROAD 919 CONESTOGA ROAD, BUILDING THREE

SUITE 350 SUITE 110

BALA CYNWYD, PA 19004 ROSEMONT, PA 19010

Current Mailing Address: New Mailing Address:

33 ROCK HILL ROAD 919 CONESTOGA ROAD, BUILDING THREE SUITE 350 SUITE 110

BALA CYNWYD, PA 19004 ROSEMONT, PA 19010

FEI Number: 23-2950335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CF

Name: MUTCH, JULIA M

Address: 33 PLAYERS CLUB VILLAS
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: JULIA M MUTCH CP 01/26/2011