

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006498

FILED
Apr 16, 2009
Secretary of State

Entity Name: EDITHA BIELITZ M.D., INC.

Current Principal Place of Business:

4225 WOODBINE ROAD SUITE G
PACE, FL 32571

New Principal Place of Business:

9400 UNIVERSITY PKWY.
STE. 207
PENSACOLA, FL 32514 US

Current Mailing Address:

4225 WOODBINE ROAD SUITE G
PACE, FL 32571

New Mailing Address:

9400 UNIVERSITY PKWY.
STE. 207
PENSACOLA, FL 32514 US

FEI Number: 06-1482277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIELITZ, EDITHA MD
4225 WOODBINE ROAD SUITE G
PACE, FL 32571 US

Name and Address of New Registered Agent:

BIELITZ, EDITHA MD
9400 UNIVERSITY PKWY.
SUITE 207
PENSACOLA, FL 32514 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BIELITZ, EDITHA M.D.
Address: 4225 WOODBINE ROAD SUITE G
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: BIELITZ, EDITHA M.D.
Address: 9400 UNIVERSITY PKWY. STE. 207
City-St-Zip: PENSACOLA, FL 32514 US

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: EDITHA BIELITZ

MD

04/16/2009

Electronic Signature of Signing Officer or Director

Date