

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G31269

FILED
May 03, 2010
Secretary of State

Entity Name: HALIFAX EMERGENCY PHYSICIANS MEEK & ASSOCIATES, M.D., P.A.

Current Principal Place of Business:

303 N CLYDE MORRIS BLVD
DAYTONA BCH, FL 321142709

New Principal Place of Business:

220 S RIDGEWOOD AVE STE 130
DAYTONA BCH, FL 32114

Current Mailing Address:

P O BOX 11107
DAYTONA BEACH, FL 32120 US

New Mailing Address:

220 S RIDGEWOOD AVE STE 130
DAYTONA BCH, FL 32114

FEI Number: 59-2271175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEEK, WILLIAM H
303 N CLYDE MORRIS BLVD
DAYTONA BCH., FL 32114 US

Name and Address of New Registered Agent:

MEEK, WILLIAM H
220 S RIDGEWOOD AVE STE 130
DAYTONA BCH., FL 32114 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:

05/03/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD
Name: MEEK, WILLIAM H
Address: 220 S RIDGEWOOD AVE STE 130
City-St-Zip: DAYTONA BEACH, FL 32114

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: WILLIAM H MEEK

PSTD

05/03/2010

Electronic Signature of Signing Officer or Director

Date