2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# K74753

Entity Name: WEST COAST OBSTETRICS AND GYNECOLOGY, P.A.

Current Principal Place of Business:

513 MANATEE AVENUE EAST
BRADENTON, FL 34208

New Principal Place of Business:

513 MANATEE AVENUE EAST
BRADENTON, FL 34208 US

Current Mailing Address:

513 MANATEE AVENUE EAST
BRADENTON, FL 34208

New Mailing Address:

513 MANATEE AVENUE EAST
BRADENTON, FL 34208 US

FEI Number: 65-0115560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINLAN, JOHN V
601 12TH STREET WEST
BRADENTON, FL 34205 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: DPT ( ) Delete
Name: MATTA, JOSE R MD
Address: 513 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete
Name: LEMAY-PACE, MICHELE
Address: 513 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: MATTA, JOSE R MD
Address: 513 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208 US

Title: D (X) Change ( ) Addition
Name: LEMAY-PACE, MICHELE
Address: 513 MANATEE AVENUE EAST
City-St-Zip: BRADENTON, FL 34208 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: JOSE MATTA DR. 03/11/2009
Electronic Signature of Signing Officer or Director Date