

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001938

Entity Name: WEST FLORIDA PHRF, INC

FILED
Apr 02, 2008
Secretary of State

Current Principal Place of Business:

535 CENTRAL AVE
401
ST PETERSBURG, FL 33701 US

Current Mailing Address:

535 CENTRAL AVE
401
ST PETERSBURG, FL 33701 US

New Principal Place of Business:

227 BAYSIDE DRIVE
CLEARWATER, FL 33767 US

New Mailing Address:

227 BAYSIDE DRIVE
CLEARWATER, FL 33767 US

FEI Number: 42-1579090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANCED CLINICAL RESOURCES, INC
535 CENTRAL AVE
401
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

BOOTH, DICK
11140 9TH ST EAST
TREASURE ISLAND, FL 33706 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: DICK BOOTH

04/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOOKER, J A
Address: 535 CENTRAL AVE, SUITE 401
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: CUSSINS, GEORGE
Address: 6514 SANTIAGO ST
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: S,D () Change (X) Addition
Name: BOOTH, DICK
Address: 11140 9TH ST EAST
City-St-Zip: TREASURE ISLAND, FL 33706 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE CUSSINS

P

04/02/2008

Electronic Signature of Signing Officer or Director

Date