2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N08000000270

Entity Name: MICHELLE WILDMAN - OCCUPATIONAL THERAPIST, P.A.

Current Principal Place of Business:

122 EGLIN PARKWAY N.E.
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

122 EGLIN PARKWAY N.E.
FT. WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 13-4331291 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARTER, BARBARA
122 EGLIN PKWY
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

WILDMAN, JOLENE
122 EGLIN PKWY
FT. WALTON BEACH, FL 32548 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: JOLENE WILDMAN 01/12/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P-D ( ) Delete
Name: WILDMAN, MICHELLE
Address: 253 MATTIE KELLY BLVD.
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change ( ) Addition
Name: WILDMAN, MICHELLE
Address: 11 NEPTUNE DRIVE
City-St-Zip: MARY ESTHER, FL 32569

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: MICHELLE WILDMAN MS. 01/12/2009
Electronic Signature of Signing Officer or Director Date