

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 11, 2011
Secretary of State**

DOCUMENT# N18160

Entity Name: PINELLAS COUNTY MEDICAL SOCIETY ALLIANCE, INC.

Current Principal Place of Business:

4900 CREEKSIDE DR
SUITE G
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

156 RAMON WAY NE
ST PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-2861711 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RAIFORD, ANISSA
4900 CREEKSIDE DR
SUITE G
CLEARWATER, FL 33760 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

OFFICERS AND DIRECTORS:

Title: D
Name: CARLSON, CHERYL L
Address: 156 RAMON WAY NE
City-St-Zip: ST. PETERSBURG, FL 33704 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHERYL L CARLSON

D

04/11/2011

Electronic Signature of Signing Officer or Director

Date