

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000047851

FILED  
May 26, 2010  
Secretary of State

**Entity Name:** COMPREHENSIVE MEDICAL MANAGEMENT, INC.

**Current Principal Place of Business:**

403 CAMELLIA AVENUE  
TITUSVILLE, FL 32796 US

**New Principal Place of Business:**

**Current Mailing Address:**

403 CAMELLIA AVENUE  
TITUSVILLE, FL 32796 US

**New Mailing Address:**

**FEI Number:** 59-3645944

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HERMANSON, DIANA M  
1763 ROBINHOOD AVE  
TITUSVILLE, FL 32796 US

**Name and Address of New Registered Agent:**

MCGOUGH, CHERYL L  
4405 PLUMOSA DRIVE  
MIMS, FL 32754 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: CHERYL L MCGOUGH

05/26/2010

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: DP  
Name: MCGOUGH, CHERYL L  
Address: 4405 PLUMOSA DRIVE  
City-St-Zip: MIMS, FL 32754

Title: VP  
Name: MCGOUGH, MARK T  
Address: 4405 PLUMOSA DRIVE  
City-St-Zip: MIMS, FL 32754

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: CHERYL L MCGOUGH

DP

05/26/2010

Electronic Signature of Signing Officer or Director

Date