

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jul 07, 2010
Secretary of State

Entity Name: WUESTHOFF EMERGENCY PHYSICIANS, P.A.

Current Principal Place of Business:

6278 N.FEDERAL HIGHWAY
SUITE 186
FT.LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6278 N.FEDERAL HIGHWAY
SUITE 186
FT.LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 56-2202489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: DPT
Name: NICHOL, CURRIN M MD
Address: 6278 N.FEDERAL HIGHWAY
City-St-Zip: FT.LAUDERDALE, FL 33308

Title: DVPS
Name: WILLIAMS, DAVID
Address: 6278 N.FEDERAL HIGHWAY
City-St-Zip: FT.LAUDERDALE, FL 33308

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: C. M. NICHOL, M.D.

DPT

07/07/2010

Electronic Signature of Signing Officer or Director

Date