## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000071081

Entity Name: DR. MEL YOUNGS, D.C., P.A.

**FILED** Mar 11, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

916 S.E. CAPE CORAL PARKWAY CAPE CORAL, FL 33904

**Current Mailing Address: New Mailing Address:** 

916 S.E. CAPE CORAL PARKWAY CAPE CORAL, FL 33904

FEI Number: 65-1030692 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

YOUNGS, MEL DR 916 S.E. ĆAPE CORAL PARKWAY CAPE CORAL, FL 33904

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PSD

Name: YOUNGS, MELINA

916 SE CAPE CORAL PKWY Address: City-St-Zip: CAPE CORAL, FL 33904

Title: **VPT** 

YOUNGS, RICHARD Name:

916 SE CAPE CORAL PKWY Address: CAPE CORAL, FL 33904 City-St-Zip:

Title:

ESQUERRE, FRANCIS Name:

916 SE CAPE CORAL PARKWAY Address:

City-St-Zip: CAPE CORAL, FL 33904

Title: SECR

YOUNGS, GINA M DR DMD Name:

Address: 3830 SE 4TH AVE

City-St-Zip: CAPE CORAL, FL 33904 LE

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: MELINA YOUNGS **PSD** 03/11/2010