## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000088515

Entity Name: GERIATRX CARE, INC.

FILED Feb 18, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
850 NW F 151	EDERAL HIG	HWAY			
STUART,	FL 34994				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	BIMINI CIRCL Y, FL 34990	E SOUTH			
FEI Number: 65-1043673 FEI Number Applied For ( )		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	TER R BIMINI CIRCL Y, FL 34990	E SOUTH US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	l office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GIL, WALTER	NI CIRCLE SOUTH	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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

SIGNATURE: WALTER R. GIL, MD P 02/18/2009