

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001488

FILED
Feb 16, 2011
Secretary of State

Entity Name: WOMEN'S CARE OF CLERMONT, P.A.

Current Principal Place of Business:

1725 EAST HWY 50
B
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

1725 EAST HWY 50
B
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 59-3689441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN-GLOVER, SHELLEY
6113 BLAKEFORD DRIVE
WINDERMERE, FL 34786 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: P
Name: COLEMAN GLOVER, SHELLEY
Address: 1725 EAST HWY 50 STE B
City-St-Zip: CLERMONT, FL 34711

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: SHELLEY C. GLOVER

DR

02/16/2011

Electronic Signature of Signing Officer or Director

Date