

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011942

FILED
Apr 29, 2009
Secretary of State

Entity Name: WEST COAST PRACTICE MANAGEMENT SERVICES, P.A.

Current Principal Place of Business:

606 SOUTH OWL DRIVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

PO BOX 49434
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 65-1077224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DOERR, KENNETH D
240 S. PINEAPPLE AVE., 10TH FL
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

DOERR, KENNETH D
1990 MAIN ST.
SUITE 700
SARASOTA, FL 34236 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: _____ 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CULP, STEPHEN C
Address: 606 SOUTH OWL DRIVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CULP, STEPHEN C STEPHEN
Address: 606 SOUTH OWL DRIVE
City-St-Zip: SARASOTA, FL 34236

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: STEPHEN CULP _____ D 04/29/2009
Electronic Signature of Signing Officer or Director Date