

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011250

Entity Name: FAMILY PHYSICIAN SERVICES, INC.

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

10278 BUENA VENTURA DR
BOCA RATON, FL 33498

New Principal Place of Business:

801 MEADOWS ROAD
111 B
BOCA RATON, FL 33486

Current Mailing Address:

10278 BUENA VENTURA DR
BOCA RATON, FL 33498

New Mailing Address:

801 MEADOWS ROAD
111 B
BOCA RATON, FL 33486

FEI Number: 75-2989139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JOSE CPA
12839 NW 18 COURT
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

AYALA, DWIGHT G M.D.
801 MEADOWS ROAD
111 B
BOCA RATON, FL 33486 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: DWIGHT G AYALA

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AYALA, DWIGHT MD
Address: 10278 BUENA VENTURA DRE
City-St-Zip: BOCA RATON, FL 33498

Title: V () Delete
Name: AYALA, MARIANELA
Address: 10278 BUENA VENTURA DR
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AYALA, DWIGHT MD
Address: 801 MEADOWS ROAD, SUITE # 111 B
City-St-Zip: BOCA RATON, FL 33486

Title: VP (X) Change () Addition
Name: AYALA, MARIANELA
Address: 801 MEADOWS ROAD, SUITE # 111 B
City-St-Zip: BOCA RATON, FL 33486

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: DWIGHT G AYALA

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date