

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000062950

FILED
Mar 25, 2009
Secretary of State

Entity Name: SPRUCE CREEK FLIGHT PHYSICALS, P.A.

Current Principal Place of Business:

140 PIPER BOULEVARD
DAYTONA BEACH, FL 32128

New Principal Place of Business:

140 PIPER BOULEVARD
PORT ORANGE, FL 32128

Current Mailing Address:

140 PIPER BOULEVARD
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: 73-1644517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURRLE, ROBERT W M.D.
1786 ROSCOE TURNER TRAIL
PORT ORANGE, FL 32128 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: KURRLE, ROBERT W PRESIDE
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: DR () Change (X) Addition
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: DR () Change (X) Addition
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: DR () Change (X) Addition
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: DR () Change (X) Addition
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

Title: DR () Change (X) Addition
Name: KURRLE, ROBERT W
Address: 1786 ROSCOE TURNER TRAIL
City-St-Zip: PORT ORANGE, FL 32128

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: ROBERT W. KURRLE

DR

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date