

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004556

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: INTERMED OF COCONUT CREEK, INC.

**Current Principal Place of Business:**

4914 NW 120TH AVENUE  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

5355 LYONS ROAD  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4914 NW 120TH AVENUE  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 14-1867974      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRAY, CHANTAL  
4914 NW 120TH AVENUE  
CORAL SPRINGS, FL 33076      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: D      ( ) Delete  
Name: BRAY, CHANTAL  
Address: 4914 NW 120TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D      ( ) Delete  
Name: BOURQUE, LISE  
Address: 2334 SOUTH CYPRESS BEND APT. 608  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D      ( ) Delete  
Name: BOURQUE, JEAN-CLAUDE MD  
Address: 2334 SOUTH CYPRESS BLVD., APT 608  
City-St-Zip: POMPANO BEACH, FL 33069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHANTAL BRAY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS.

01/17/2007

\_\_\_\_\_  
Date