

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067868

FILED
Jan 31, 2008
Secretary of State

Entity Name: DR. ALICE J. MELLOW, P.A.

Current Principal Place of Business:

4541 WILLOW POND CT.
#E
WEST PALM BEACH, FL 33417

New Principal Place of Business:

3339 ALBA WAY
DEERFIELD BEACH, FL 33442

Current Mailing Address:

4541 WILLOW POND CT.
#E
WEST PALM BEACH, FL 33417

New Mailing Address:

3339 ALBA WAY
DEERFIELD BEACH, FL 33442

FEI Number: 65-1194618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELLOW, ALICE J
4541 WILLOW POND CT.
#E
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

MELLOW, ALICE J
3339 ALBA WAY
DEERFIELD, FL 33442 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: ALICE J. MELLOW

01/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELLOW, ALICE J
Address: 4541 WILLOW POND CT., #E
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELLOW, ALICE J
Address: 3339 ALBA WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

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: ALICE J. MELLOW

P

01/31/2008

Electronic Signature of Signing Officer or Director

Date