

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091252

FILED
Jul 21, 2009
Secretary of State

Entity Name: SARASOTA FAMILY HEALTH CARE, INC.

Current Principal Place of Business:

6813 S TAMIAMI TRAIL
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

6813 S TAMIAMI TRAIL
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 20-0170761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, FRANCES G ESQ
901 VENETIA BAY BLV D 357
VENICE, FL 34285 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

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: PS () Delete
Name: MASON, CLAUDE JOHN MD
Address: 154 LOOKOUT PT DR
City-St-Zip: OSPREY, FL 34229

Title: VPT () Delete
Name: MAYER, JOHN JR
Address: 521 HARBOR WAY
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPT (X) Change () Addition
Name: MEYER, JOHN JR
Address: 1650 SUNRISE
City-St-Zip: SARASOTA, FL 34231

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: CLAUDE J MASON

PS

07/21/2009

Electronic Signature of Signing Officer or Director

Date