

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102274

FILED
Mar 20, 2009
Secretary of State

Entity Name: CHRISTINA T. THOMAS, M.D., P.A.

Current Principal Place of Business:

8075 SPYGLASS HILL RD
MELBOURNE, FL 32940

New Principal Place of Business:

2571 W EAU GALLIE BLVD SUITE 1
MELBOURNE, FL 32935

Current Mailing Address:

240 N WICKHAM RD #106
MELBOURNE, FL 32935

New Mailing Address:

2571 W EAU GALLIE BLVD SUITE 1
MELBOURNE, FL 32935

FEI Number: 57-1209241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, CHRISTINE
310 SALIDA DR
INDIAN HARBOUR BEACH, FL 32937 US

Name and Address of New Registered Agent:

KAHN, MICHAEL
482 NORTH HARBOUR CITY BLVD
MELBOURNE, FL 32935 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: CHRISTINE THOMAS

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THOMAS, CHRISTINE T
Address: 310 SALIDA DR
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: THOMAS, CHRISTINE T
Address: 310 SALIDA DR
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

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: CHRISTINE THOMAS

MGR

03/20/2009

Electronic Signature of Signing Officer or Director

Date