

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000106789

FILED
Apr 06, 2009
Secretary of State

Entity Name: MEMBERSHIP MEDICAL MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

2702 TAMPA ROAD
PALM HARBOR, FL 34684

New Principal Place of Business:

3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761

Current Mailing Address:

2702 TAMPA ROAD
PALM HARBOR, FL 34684

New Mailing Address:

3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761

FEI Number: 20-1381355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEAL, MICHAEL L DO
2702 TAMPA RD
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

O'NEAL, MICHAEL L DO
3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761 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:

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: O'NEAL, MICHAEL L DO
Address: 2792 TAMPA RD.
City-St-Zip: PALM HARBOR, FL 34684

Title: TRES () Delete
Name: CHEWCASKIE, STEVE
Address: 146 BUENA VISTA DRIVE NORTH
City-St-Zip: DUNEDIN, FL 34698

Title: CTO () Delete
Name: HARMON, STEVE
Address: 284 CYPRESS TRACE
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: O'NEAL, MICHAEL L DO
Address: 3165 MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33761

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 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: MICHAEL O'NEAL, DO

CEO

04/06/2009

Electronic Signature of Signing Officer or Director

Date