

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163795

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: COASTAL ALLERGY & ASTHMA, P.A.

## Current Principal Place of Business:

468 SUDDUTH AVENUE  
PANAMA CITY, FL 32401

## New Principal Place of Business:

801 EAST 6TH STREET  
SUITE 304  
PANAMA CITY, FL 32401

## Current Mailing Address:

468 SUDDUTH AVENUE  
PANAMA CITY, FL 32401

## New Mailing Address:

801 EAST 6TH STREET  
SUITE 304  
PANAMA CITY, FL 32401

FEI Number: 20-2225843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMIN, BINITA  
468 SUDDUTH AVENUE  
PANAMA CITY, FL 32401 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: VST ( ) Delete  
Name: AMIN, BINITA  
Address: 468 SUDDUTH AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BINITA V. AMIN M.D.

VST

03/30/2009

Electronic Signature of Signing Officer or Director

Date