2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# P05000010887

Entity Name: VEIN TREATMENT CENTER OF PALM COAST, P.A.

Current Principal Place of Business:

21 HOSPITAL DRIVE
SUITE 260
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 730657
ORMOND BEACH, FL 32173

New Mailing Address:

FEI Number: 56-2497596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLUCCI, NICKOLAS JOHN
67 SOUTHLAKE DRIVE
PALM COAST, FL 32137 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: D ( ) Delete
Name: COLLUCCI, NICKOLAS JOHN
Address: 67 SOUTHLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete
Name: STEIN, CHARLES I
Address: 67 SOUTHLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: STEIN, CHARLES I
Address: 29 WINDING CREEK WAY
City-St-Zip: ORMOND BEACH, FL 32174

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: CHARLES I STEIN, MD VP 02/12/2009

Electronic Signature of Signing Officer or Director Date