

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105037

FILED
Mar 21, 2010
Secretary of State

Entity Name: PALMETTO FAMILY HEALTH CARE, INC.

Current Principal Place of Business:

2460 W. SCENIC HIGHWAY 30-A
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

4821 HIGHWAY 98 W, SOUTHHAVEN SUITE 104
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

2460 W. SCENIC HIGHWAY 30-A
SANTA ROSA BEACH, FL 32459

New Mailing Address:

4821 HIGHWAY 98 W, SOUTHHAVEN SUITE 104
SANTA ROSA BEACH, FL 32459

FEI Number: 20-3232407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, DEBORAH L
#2 BEACHFRONT TRAIL
SANTA ROSA BEACH, FL 32459 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: ARNP
Name: SULLIVAN, DEBORAH L
Address: #2 BEACHFRONT TRAIL
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH L SULLIVAN

ARNP

03/21/2010

Electronic Signature of Signing Officer or Director

Date