2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153641

Entity Name: MRC OF CITRUS PARK, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

6615 GUNN HIGHWAY 6607 GUNN HIGHWAY TAMPA, FL 33625 US TAMPA, FL 33625 US

Current Mailing Address: New Mailing Address:

3229 HIGHWAY 17 3339 HIGHWAY 17

GREEN COVE SPRINGS, FL 32043 US GREEN COVE SPRINGS, FL 32043 US

FEI Number: 20-3817587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOILEAU, NINA SOILEAU, NINA 3229 HWY 17 3339 HWY 17

GREEN COVE SPRINGS, FL 32043 US GREEN COVE SPRINGS, FL 32043 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: 04/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SOILEAU, JOHN W
 Name:
 SOILEAU, JOHN W

 Address:
 3229 HIGHWAY 17
 Address:
 3339 HIGHWAY 17

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VS () Delete Title: VS (X) Change () Addition

 Name:
 SOILEAU, NINA O
 Name:
 SOILEAU, NINA O

 Address:
 3229 HIGHWAY 17
 Address:
 3339 HIGHWAY 17

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: V () Delete Title: V (X) Change () Addition Name: SOILEAU-HENNING, MELANIE B Name: SOILEAU-HENNING, MELANIE B

Address: 3229 HWY 17 Address: 3339 HWY 17

City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

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: JOHN SOILEAU P 04/27/2009