

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000057220

FILED
Apr 29, 2011
Secretary of State

Entity Name: GULF COAST INFECTIOUS DISEASES, INC.

Current Principal Place of Business:

2120 EAST JOHNSON AVE.
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

P O BOX 11640
PENSACOLA, FL 32524

New Mailing Address:

FEI Number: 20-4744987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMARI, PARDEEP
1130 KELTON BLVD.
GULF BREEZE, FL 32563 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

OFFICERS AND DIRECTORS:

Title: PST
Name: KUMARI, PARDEEP
Address: 1130 KELTON BOULEVARD
City-St-Zip: GULF BREEZE, FL 32563

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: PARDEEP KUMARI

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date