

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000081652

FILED
Feb 11, 2009
Secretary of State

Entity Name: URGENT CARE WEST WEIGHT MANAGEMENT, INC.

Current Principal Place of Business:

2050 40TH AVENUE
SUITE 6
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

2050 40TH AVENUE
SUITE 6
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 20-5032313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSWAY MOORE & TAYLOR, P.L.C.
ATTN: HELEN E. SCOTT
5070 NORTH HIGHWAY A-1-A #200
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

ROSSWAY MOORE & TAYLOR, P.L.C.
ATTN: ELIESE DRAWDY, DIRECTOR
5070 NORTH HIGHWAY A-1-A #200
VERO BEACH, FL 32963 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: ELIESE DRAWDY

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATTICE, MICHAEL MD
Address: 2050 40TH AVENUE #6
City-St-Zip: VERO BEACH, FL 32960

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: ELIESE DRAWDY

MRS.

02/11/2009

Electronic Signature of Signing Officer or Director

Date