2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# P06000142706

Entity Name: MC MEDICAL ASSOCIATES, P.A.

Current Principal Place of Business:

6531 PLANTATION PRESERVE CIRCLE N.
FT. MYERS, FL 33966 US

New Principal Place of Business:

1519 SE 47TH STREET
CAPE CORAL, FL 33904 US

Current Mailing Address:

6531 PLANTATION PRESERVE CIRCLE N.
FT. MYERS, FL 33966 US

New Mailing Address:

FEI Number: 20-5854304 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANDELORE, MICHELE
6531 PLANTATION PRESERVE CIRCLE N.
FT. MYERS, FL 33966 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: PDTS ( ) Delete
Name: CANDELORE, MICHELE
Address: 6531 PLANTATION PRESERVE CIRCLE N.
City-St-Zip: FT. MYERS, FL 33966 US

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: MICHELE CANDELORE PDTS 04/18/2008
Electronic Signature of Signing Officer or Director Date