

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010796

FILED
Feb 26, 2011
Secretary of State

Entity Name: PHYSICIAN ASSISTANT COVERAGE ON DEMAND, INC.

Current Principal Place of Business:

132 MONAHAN DRIVE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

132 MONAHAN DRIVE
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 20-8292444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLANCY, CHARLES J
132 MONAHAN DRIVE
FORT WALTON BEACH, FL 32547 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: P
Name: CLANCY, CHARLES J
Address: 132 MONAHAN DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: VP
Name: CLANCY, SHERI A
Address: 132 MONAHAN DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

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: CHARLES J CLANCY

PRES

02/26/2011

Electronic Signature of Signing Officer or Director

Date