

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080122

Entity Name: ALBA CLINICAL RESEARCH, INC.

FILED
Mar 01, 2010
Secretary of State

Current Principal Place of Business:

1433 S FT HARRISON
STE A
CLEARWATER, FL 33756

New Principal Place of Business:

1433 S FT HARRISON
STE F
CLEARWATER, FL 33756

Current Mailing Address:

1433 S FT HARRISON
STE A
CLEARWATER, FL 33756

New Mailing Address:

1433 S FT HARRISON
STE F
CLEARWATER, FL 33756

FEI Number: 84-1719144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, MARY E
1433 S FT HARRISON
STE A
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

MILLER, MARY E
1433 S FT HARRISON
STE F
CLEARWATER, FL 33756 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:

03/01/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: MILLER, MARY E
Address: 1433 S FT HARRISON SUITE F
City-St-Zip: CLEARWATER, FL 33756

Title: TREA
Name: MILLER, KEITH A
Address: 1433 S FT HARRISON SUITE F
City-St-Zip: CLEARWATER, FL 33756

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: MARY E MILLER

P

03/01/2010

Electronic Signature of Signing Officer or Director

Date