# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 27, 2008**
**Secretary of State**

DOCUMENT# P07000080555

**Entity Name:** EAST COAST CLINICAL RESEARCH GROUP, INC.

**Current Principal Place of Business:**

4026 62ND COURT
VERO BEACH, FL 32966

**New Principal Place of Business:**

**Current Mailing Address:**

4026 62ND COURT
VERO BEACH, FL 32966

**New Mailing Address:**

**FEI Number: 26-0537879** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GERVASIO, BARBARA A
4026 62ND COURT
VERO BEACH, FL 32966 US

**Name and Address of New Registered Agent:**

GERVASIO, BARBARA A RN
4026 62ND COURT
VERO BEACH, FL 32966 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: BARBARA A GERVASIO, RN 01/27/2008
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: GERVASIO, BARBARA A R.N.
Address: 4026 62ND COURT
City-St-Zip: VERO BEACH, FL 32966

Title: D ( ) Delete
Name: BRIDGES, MARIANNE R.N.
Address: 3830 HIGHWAY A1A, SUITE 4-124
City-St-Zip: MELBOURNE, FL 32951

Title: D ( ) Delete
Name: SHASHA, NATALIE R .N.
Address: 114 SWEET BAY CIRCLE
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SHASHA, NATALIE R.N.,JD
Address: 114 TALLOW TRAIL
City-St-Zip: JUPITER, FL 33458

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: MARIANNE B BRIDGES DIR 01/27/2008
Electronic Signature of Signing Officer or Director Date