2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P07000133614

Entity Name: ACUSPA, P.A.

Current Principal Place of Business:

4410 MEADOWOOD STREET
ORLANDO, FL 32812

New Principal Place of Business:

3722 CONWAY ROAD
ORLANDO, FL 32812

Current Mailing Address:

PO BOX 592494
ORLANDO, FL 32859

New Mailing Address:

4410 MEADOWOOD STREET
ORLANDO, FL 32812

FEI Number: 36-4623043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIPPENWORTH, TAMMY LEE
4410 MEADOWOOD STREET
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

DIPPENWORTH, TAMMY L DOM
4410 MEADOWOOD STREET
ORLANDO, FL 32812 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: TAMMY LEE DIPPENWORTH 03/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVPD ( ) Delete
Name: DIPPENWORTH, TAMMY LEE
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

Title: S ( ) Delete
Name: DIPPENWORTH, TAMMY LEE
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

Title: T ( ) Delete
Name: DIPPENWORTH, JOHN
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPD (X) Change ( ) Addition
Name: DIPPENWORTH, TAMMY L DOM
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

Title: S (X) Change ( ) Addition
Name: DIPPENWORTH, TAMMY L DOM
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

Title: T (X) Change ( ) Addition
Name: DIPPENWORTH, TAMMY L DOM
Address: 4410 MEADOWOOD STREET
City-St-Zip: ORLANDO, FL 32812

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: TAMMY LEE DIPPENWORTH PRES 03/24/2009
Electronic Signature of Signing Officer or Director Date