2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000020483

Entity Name: GARY MAJOR'S DOCTOR COMPUTER INC

FILED Apr 29, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	YER ROAD A, FL 34233			4648 ASHTON ROAD SARASOTA, FL 34233		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
3949 SAWYER ROAD SARASOTA, FL 34233				4648 ASHTON ROAD SARASOTA, FL 34233		
FEI Number: 26-2033109 FEI Number Applied For () FEI			FEI Number Not App	mber Not Applicable () Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
MAJOR, GARY J 3949 SAWYER ROAD SARASOTA, FL 34233 US			4648 ASH	MAJOR, GARY J 4648 ASHTON ROAD SARASOTA, FL 34233 US		
	named entity see of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or both,	
SIGNATU	RE:				04/29/2009	
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () MAJOR, GARY 3949 SAWYER SARASOTA, FL	ROAD	Title: Name: Address: City-St-Zip:	P (X MAJOR, GARY 4648 ASHTON SARASOTA, F	ROAD	
Title: Name: Address: City-St-Zip:	SEC () MAJOR, NANCY 3949 SAWYER SARASOTA, FL	ROAD	Title: Name: Address: City-St-Zip:	ST (X MAJOR, NANO 4648 ASHTON SARASOTA, F	ROAD	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	V (DIEHL, NORM 4648 ASHTON SARASOTA, F	ROAD	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	V (DEL PIZZO, JI 4648 ASHTON SARASOTA, F	ROAD	

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: GARY J. MAJOR P 04/29/2009