

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000031240

Entity Name: PARAMOUNT URGENT CARE, INC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

8640 EAST CR 466  
SUITE A  
THE VILLAGES, FL 32162

## New Principal Place of Business:

## Current Mailing Address:

8640 EAST CR 466  
SUITE A  
THE VILLAGES, FL 32162

## New Mailing Address:

FEI Number: 61-1558329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTOS, ADAMASTOR A  
10040 SE 42ND CT  
BELLEVIEW, FL 34420 US

## Name and Address of New Registered Agent:

SPAHN, RICHARD A  
12700 SW 112TH ST RD  
DUNNELLON, FL 34432 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: RICHARD A SPAHN

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P (X) Delete  
Name: SANTOS, ADAMASTOR  
Address: 10040 SE 42ND CT  
City-St-Zip: BELLEVIEW, FL 34420

Title: VP ( ) Delete  
Name: HUMPHREY, MICHAEL  
Address: 8640 EAST CR 466  
City-St-Zip: THE VILLAGES, FL 32162

Title: T ( ) Delete  
Name: EASTERLING, ADRIAN J  
Address: 1850 SE 18TH AVE # 602  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PTD (X) Change ( ) Addition  
Name: HUMPHREY, MICHAEL  
Address: 8640 EAST CR 466  
City-St-Zip: THE VILLAGES, FL 32162

Title: VPSD (X) Change ( ) Addition  
Name: EASTERLING, ADRIAN J  
Address: 1850 SE 18TH AVE # 602  
City-St-Zip: OCALA, FL 34471

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: MICHAEL HUMPHREY

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date