

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055231

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** PRACTICE MANAGEMENT STRATEGIES INC.

**Current Principal Place of Business:**

3464 SHADY BROOK LANE  
SARASOTA, FL 34243 US

**New Principal Place of Business:**

7545 CASTLE DRIVE  
SARASOTA, FL 34240 US

**Current Mailing Address:**

P.O. BOX 15312  
SARASOTA, FL 34277 US

**New Mailing Address:**

7545 CASTLE DRIVE  
SARASOTA, FL 34240 US

**FEI Number:** 26-2921874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOUNG, CATHY L  
3464 SHADY BROOK LANE  
SARASOTA, FL 34243 US

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

YOUNG, CATHY L  
7545 CASTLE DRIVE  
SARASOTA, FL 34240 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: CATHY L YOUNG

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P, D  
Name: YOUNG, CATHY L  
Address: 7545 CASTLE DRIVE  
City-St-Zip: SARASOTA, FL 34240 US

Title: S, T  
Name: YOUNG, WILLIAM A YOUNG  
Address: 7545 CASTLE DRIVE  
City-St-Zip: SARASOTA, FL 34240 US

Title: D  
Name: YOUNG, WILLIAM A  
Address: 7545 CASTLE DRIVE  
City-St-Zip: SARASOTA, FL 34240 US

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: CATHY L YOUNG

CEO

04/28/2011

Electronic Signature of Signing Officer or Director

Date