

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063843

Entity Name: JOHN M. CHILDRESS, MD, PA

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

2919 BISCAYNE BLVD
MIAMI, FL 33137

New Principal Place of Business:

2001 BISCAYNE BLVD
#115
MIAMI, FL 33137

Current Mailing Address:

10 VENETIAN WAY SUITE 301
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 26-2913216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDRESS, JOHN M
2919 BISCAYNE BLVD
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

CHILDRESS, JOHN M
2001 BISCAYNE BLVD
#115
MIAMI, FL 33137 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: _____

Electronic Signature of Registered Agent

06/15/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVP () Delete
Name: CHILDRESS, JOHN M
Address: 2919 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: ST () Delete
Name: CHILDRESS, JOHN M
Address: 2919 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP (X) Change () Addition
Name: CHILDRESS, JOHN M
Address: 2001 BISCAYNE BLVD #115
City-St-Zip: MIAMI, FL 33137

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

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: JOHN CHILDRESS

Electronic Signature of Signing Officer or Director

DR.

06/15/2009

Date