2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000088456

Entity Name: SCULPSIT PLASTIC SURGERY, P.A.

FILED May 05, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

1118 GULF BREEZE PARKWAY SUITE 200,203,206 GULF BREEZE, FL 32561

Current Mailing Address: New Mailing Address:

1118 GULF BREEZE PARKWAY SUITE 200,203,206 GULF BREEZE, FL 32561

FEI Number: 26-3502038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALKER, GARY 202 SOUTH ROME AVENUE SUITE 100 TAMPA, FL 33606 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 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: CEO (X) Change () Addition

Name: WOLFORT, SEAN F Name: WOLFORT, SEAN F

Address: 175 MAY APPLE LANE Address: 1118 GULF BREEZE PARKWAY

City-St-Zip: JOHNSON CITY, TN 37615 City-St-Zip: GULF BREEZE, FL 32561

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: SEAN F WOLFORT CEO 05/05/2009