2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 13, 2012
Secretary of State

DOCUMENT# P10000028093

Entity Name: ALLERGY SPECIALTY CARE, P.A.

Current Principal Place of Business:

213 SW MAIN BLVD
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

213 SW MAIN BLVD
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 27-2202844 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, WILLIAM
213 SW MAIN BLVD
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: MR
Name: SANDERS, WILLIAM
Address: 213 SW MAIN BLVD.
City-St-Zip: LAKE CITY, FL 32025

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: WILLIAM SANDERS MR 06/13/2012

Electronic Signature of Signing Officer or Director Date