2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2011
Secretary of State

DOCUMENT# P10000055512

Entity Name: GULF COMPREHENSIVE GASTROENTEROLOGY, INC.

Current Principal Place of Business:

655 N INDIAN AVE SUITE D
ENGLEWOOD, FL 34223

New Principal Place of Business:

655 N INDIANA AVE SUITE D
ENGLEWOOD, FL 34223

Current Mailing Address:

655 N INDIAN AVE SUITE D
ENGLEWOOD, FL 34223

New Mailing Address:

655 N INDIANA AVE SUITE D
ENGLEWOOD, FL 34223

FEI Number: 27-2958983 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOMBER, HARLAN R
3900 CLARK RD SUITE L-1
SARASOTA, FL 34233 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: PSTD
Name: DITOMASO, ANTHONY MD
Address: 655 N INDIANA AVE SUITE D
City-St-Zip: ENGLEWOOD, FL 34223

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: ANTHONY DITOMASO MD 01/21/2011

Electronic Signature of Signing Officer or Director Date