2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000001837

Entity Name: EMERALD COAST PSYCHIATRIC CARE, P.A.

Current Principal Place of Business:	**New Principal Place of Business:**
124 E. MIRACLE STRIP PARKWAY SUITE 602 MARY ESTHER, FL 32569	403 HOLLYWOOD BLVD SUITE A104 FORT WALTON BEACH, FL 32548
Current Mailing Address:	**New Mailing Address:**
124 E. MIRACLE STRIP PARKWAY SUITE 602 MARY ESTHER, FL 32569	403 HOLLYWOOD BLVD SUITE A104 FORT WALTON BEACH, FL 32548

FEI Number: 59-3161330   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:**
FOSTER, WILLIAM S 909 MAR WALT DRIVE SUITE 1014 FT. WALTON BEACH, FL 32547 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**
Title: DP ( ) Delete	Title: MD (X) Change ( ) Addition
Name: DE MOYA, VICTOR F	Name: DE MOYA, VICTOR F
Address: 348 MIRACLE STRIP PKWY SW STE 31	Address: 403 HOLLYWOOD BLVD STE A104
City-St-Zip: FT WALTON BEACH, FL 32548	City-St-Zip: FT WALTON BEACH, FL 32548

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: VICTOR DE MOYA, MD   PRES   01/30/2009

      Electronic Signature of Signing Officer or Director   Date