

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000053003

FILED
Feb 21, 2011
Secretary of State

Entity Name: NATURE COAST ORTHOPAEDICS & SPORTS MEDICINE CLINIC, P.A.

Current Principal Place of Business:

2155 W MUSTANG BLVD
BEVERLY HILLS, FL 34465 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 640580
BEVERLY HILLS, FL 34464 US

New Mailing Address:

FEI Number: 59-3256162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHOUNG, PHILIP
3122 W MUSTANG BLVD
BEVERLY HILLS, FL 34465 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: PD
Name: CHOUNG, WALTER I
Address: 3585 N MOSS CREEK PT
City-St-Zip: LECANTO, FL 34461 US

Title: MGR
Name: CHOUNG, PHILIP
Address: 3122 W MUSTANG BLVD
City-St-Zip: BEVERLY HILLS, FL 34465 US

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: PHILIP CHOUNG

MGR

02/21/2011

Electronic Signature of Signing Officer or Director

Date