

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000046094

Entity Name: MYRA REED, M.D., P.A.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

1814 THOMAS DR
PANAMA CITY, FL 32408

New Principal Place of Business:

1814 THOMAS DR
PANAMA CITY BEACH, FL 32408

Current Mailing Address:

1814 THOMAS DR
PANAMA CITY, FL 32408

New Mailing Address:

1814 THOMAS DR
PANAMA CITY BEACH, FL 32408

FEI Number: 59-3323486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, MYRA
3238 W. HWY 390
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

REED, MYRA
1814 THOMAS DR
PANAMA CITY BEACH, FL 32408 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: MYRA REED MD

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REED, MYRA
Address: 3238 W. HWY 390
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: REED, MYRA
Address: 1814 THOMAS DR
City-St-Zip: PANAMA CITY BEACH, FL 32408

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: MYRA REED

MD

03/24/2009

Electronic Signature of Signing Officer or Director

Date