

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047927

FILED
Mar 11, 2009
Secretary of State

Entity Name: SCHOLL FOOT CARE, P.A.

Current Principal Place of Business:

1501 US HWY 441 NORTH
SUITE 1304
THE VILLAGES, FL 32159 US

New Principal Place of Business:

Current Mailing Address:

1501 US HWY 441 NORTH
SUITE 1304
THE VILLAGES, FL 32159 US

New Mailing Address:

FEI Number: 59-3321158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOLL, JOHN M D.P.M.
1501 W HWY 441 N
STE 1304
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

SCHOLL, JOHN M D.P.M.
1501 US HWY 441 N
STE 1304
LADY LAKE, FL 32159 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

03/11/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: SCHOLL, JOHN M D.P.M.
Address: 1501 W HWY 441 N STE 1304
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: SCHOLL, JOHN M D.P.M.
Address: 1501 US HWY 441 N STE 1304
City-St-Zip: LADY LAKE, FL 32159

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: JOHN M. SCHOLL, DPM

Electronic Signature of Signing Officer or Director

DR

03/11/2009

Date