## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000060347

Entity Name: WALL HEALTHCARE, INC.

FILED Jan 07, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1700 MCMULLEN BOOTH ROAD SUITE A2-1 CLEARWATER, FL 33759 US

Current Mailing Address: New Mailing Address:

1700 MCMULLEN BOOTH ROAD SUITE A2-1 CLEARWATER, FL 33759 US

FEI Number: 59-3329229 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:

WALL, DAVID 1700 MCMULLEN BOOTH ROAD A2-1 CLEARWATER, FL 33759 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

## **OFFICERS AND DIRECTORS:**

Title: DF

Name: WALL, DAVID M M.D.

Address: 1700 MCMULLEN BOOTH ROAD City-St-Zip: CLEARWATER, FL 33759

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: DAVID WALL DR 01/07/2011