

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000095475

FILED
Apr 27, 2009
Secretary of State

Entity Name: COURTESY HEALTH CARE CORP.

Current Principal Place of Business:

150 2ND AVE NORTH
SUITE 400
SAINT PETERSBURG, FL 33701 US

New Principal Place of Business:

100 CENTRAL AVE
SUITE 200
SAINT PETERSBURG, FL 33701 US

Current Mailing Address:

150 2ND AVE NORTH
SUITE 400
SAINT PETERSBURG, FL 33731

New Mailing Address:

100 CENTRAL AVE
SUITE 200
SAINT PETERSBURG, FL 33701

FEI Number: 59-3348297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKSHAY, DESAI M DR
150 2ND AVE NORTH
SUITE 400
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

SANDIP, PATEL I
100 CENTRAL AVE
SUITE 200
ST PETERSBURG, FL 33701 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: SANDIP PATEL

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DESAI, AKSHAY M DR.
Address: 150 2ND AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DESAI, AKSHAY M DR.
Address: 100 CENTRAL AVE , SUITE 200
City-St-Zip: SAINT PETERSBURG, FL 33701

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: AKSHAY M. DESAI

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date