2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P96000017331

Entity Name: EMILIO ANTONETTI, M.D., P.A.

Current Principal Place of Business:

6160 N. DAVIS HWY, STE 11
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

6160 N. DAVIS HWY, STE 11
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3365149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANTONETTI, EMILIO
6160 N. DAVIS HWY, STE 11
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

ANTONETTI, EMILIO A
6160 N. DAVIS HWY, STE 11
PENSACOLA, FL 32504 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: EMILIO A. ANTONETTI 04/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ANTONETTI, EMILIO
Address: 6160 N. DAVIS HWY, STE 11
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ANTONETTI, EMILIO A
Address: 6160 N. DAVIS HWY, STE 11
City-St-Zip: PENSACOLA, FL 32504

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: EMILIO A. ANTONETTI DIR 04/23/2009
Electronic Signature of Signing Officer or Director Date