2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066322

City-St-Zip: DELRAY BEACH, FL 33445

Entity Name: JEFFREY M. SCRICCA, M.D., P.A.

FILED Mar 14, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
4800 LINTC 314-E	N BLVD							
	EACH, FL 334	445	US					
Current Mailing Address:					New Mailing Address:			
	EACH, FL 334		US		4800 LINTON BLVD 314-E DELRAY BEACH, FL		US	
FEI Number: 6	65-0686476	FEIN	umber Applied For()	FEI Nun	nber Not Applicable ()	Certi	ficate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
4800 LINTO 314-E	JEFFREY M N BLVD EACH, FL 334	445 US	8					
The above r		submits	this statement for the	purpose o	f changing its registere	d office o	or registered agent, or both,	
SIGNATUR	E:							
	Electron	ic Sign	ature of Registered Ag	ent			Date	
Election Cam	paign Financing	g Trust F	und Contribution ().					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name:	DR. () SCRICCA, JEFF				Title: Name:	() Chang	ge () Addition	

City-St-Zip:

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: JEFFREY SCRICCA PRES 03/14/2009