2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2008
Secretary of State

DOCUMENT# P96000076440

Entity Name: WELCH & MCLOY THERAPY SERVICES, P.A.

Current Principal Place of Business:

6646 US 19
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

6926 HILLS DRIVE
NEW PORT RICHEY, FL 34653

Current Mailing Address:

P.O. BOX 1502
NEW PORT RICHEY, FL 34656

New Mailing Address:

FEI Number: 59-3408008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCLOY, MARGARET A
Address: 6646 US 19 P.O. BOX 1502
City-St-Zip: NEW PORT RICHEY, FL 34656

Title: VD ( ) Delete
Name: CRUZ-COOPER, CHRISTINE
Address: 6646 US 19 P.O. BOX 1502
City-St-Zip: NEW PORT RICHEY, FL 34656

Title: STD ( ) Delete
Name: MCLOY, RICHARD J
Address: 6646 US 19 P.O. BOX 1502
City-St-Zip: NEW PORT RICHEY, FL 34656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MCLOY, MARGARET A
Address: 6926 HILLS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VD (X) Change ( ) Addition
Name: CRUZ-COOPER, CHRISTINE
Address: 6926 HILLS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: STD (X) Change ( ) Addition
Name: MCLOY, RICHARD J
Address: 6926 HILLS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: RICHARD J. MCLOY STD 04/05/2008

Electronic Signature of Signing Officer or Director Date