

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000082839

FILED
Apr 25, 2011
Secretary of State

Entity Name: PTA FAMILY CARE CENTER, INC.

Current Principal Place of Business:

447 NW 73RD AVENUE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

447 NW 73RD AVENUE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 65-0709674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, SUZANNE M
447 NW 73RD AVENUE
PLANTATION, FL 33317 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

OFFICERS AND DIRECTORS:

Title: P
Name: DAVIS, SUZANNE M
Address: 904 NE 5TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP
Name: WOJCIK, MONICA
Address: 11648 N.W. 5TH STREET
City-St-Zip: PLANTATION, FL 33325

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: MONICA WOJCIK

VP

04/25/2011

Electronic Signature of Signing Officer or Director

Date