2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086079

Entity Name: PENNY PEDIATRICS, INC., P.A.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14430 US HWY 1 SUITE A 14430 US HWY 1 SEBASTIAN, FL 32958 SUITE 101

SEBASTIAN, FL 32958

Current Mailing Address: New Mailing Address:

14430 US HWY 1 SUITE A 14430 US HWY 1 SEBASTIAN, FL 32958 SUITE 101

SEBASTIAN, FL 32958

FEI Number: 65-0951102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PENNY, MARZA
14430 US HWY 1 SUITE A
SEBASTIAN, FL 32958 US
PENNY, MARZA
14430 US HWY 1
SUITE 101

SEBASTIAN, FL 32938 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: 01/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: PENNY, MARZA Name: PENNY, MARZA

 Address:
 14430 US HWY 1 SUITE A
 Address:
 14430 US HWY 1 SUITE 101

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:
 SEBASTIAN, FL 32958

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: MARZA PENNY PRES 01/19/2009