

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S56340

FILED
May 01, 2008
Secretary of State

Entity Name: DR. MOLLY SNELL, P.A.

Current Principal Place of Business:

1000 S FEDERAL HIGHWAY
#106
FORT LAUDERDALE, FL 33316 US

Current Mailing Address:

1000 S FEDERAL HIGHWAY
#106
FORT LAUDERDALE, FL 33316 US

FEI Number: 65-0264396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAMMER, DENISE E
1000 S FEDERAL HIGHWAY
#106
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

915 MIDDLE RIVER DRIVE
#317
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

915 MIDDLE RIVER DRIVE
#317
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

CRAMMER, DENISE E
915 MIDDLE RIVER DRIVE
#317
FORT LAUDERDALE, FL 33304 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: DENISE E CRAMMER

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PECORARO, CARMINE
Address: 1768 CORAL WAY NORTH
City-St-Zip: VERO BEACH, FL 32963 US

Title: SD () Delete
Name: CRAMMER, DENISE
Address: 1768 CORAL WAY NORTH
City-St-Zip: VERO BEACH, FL 32963 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CARMINE PECORARO

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date