

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V00880

FILED
Feb 18, 2011
Secretary of State

Entity Name: GULFCOAST MEDICAL & GERIATRIC CARE, INC.

Current Principal Place of Business:

6450-38TH AVE N
STE #100
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

Current Mailing Address:

6450-38TH AVE N
STE #100
ST. PETERSBURG, FL 33710 US

New Mailing Address:

FEI Number: 59-3102796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, SONAL
6450-38TH AVE N
STE #100
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

SHAH, SONAL
6450-38TH AVE N
STE #100
ST. PETERSBURG, FL 33710 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: SONAL SHAH

02/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: SHAH, SONAL M.D
Address: 6450-38TH AVE N STE #100
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: S
Name: NANDKISHOR, SHAH
Address: 6450- 38TH AVENUE NORTH, SUITE #100
City-St-Zip: ST PETERSBURG, FL 33710 US

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: SONAL SHAH

PRES

02/18/2011

Electronic Signature of Signing Officer or Director

Date