

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V29293

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: PATIENTS FIRST NORTHAMPTON, INC.

## Current Principal Place of Business:

2907 KERRY FOREST PKWY.  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

3258 N. MONROE ST.  
TALLAHASSEE, FL 32303

## New Mailing Address:

FEI Number: 59-3122734      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEBB, BRIAN S  
2487 ELFINWING LANE  
TALLAHASSEE, FL 32308      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: P ( ) Delete  
Name: WEBB, BRIAN S  
Address: 2487 ELFINWING LANE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP ( ) Delete  
Name: SPRING, ROYCE R II  
Address: 1875 CHARDONNAY PLACE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S ( ) Delete  
Name: HICKS, THOMAS L M.D.  
Address: 2302 ELLICOTT DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: T ( ) Delete  
Name: REESE, RANDY R M.D.  
Address: 4850 BRADFORDVILLE ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DIR ( ) Change (X) Addition  
Name: MORGAN, RUTH S M.D.  
Address: 1060 LIVE OAK PLANTATION RD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: DIR ( ) Change (X) Addition  
Name: DONOVAN, RICHARD  
Address: 13686 N MERIDIAN RD  
City-St-Zip: TALLAHASSEE, FL 32312

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: ROYCE R SPRING II

VP

02/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date