2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2010
Secretary of State

DOCUMENT# V61429

Entity Name: MICHAEL J. COSTELLO, M.D., P.A.

Current Principal Place of Business:

2215 NEBRASKA AVENUE, STE 3-D
FT. PIERCE, FL 34950 US

New Principal Place of Business:

2215 NEBRASKA AVENUE,
SUITE 3-D
FT. PIERCE, FL 34950 US

Current Mailing Address:

2215 NEBRASKA AVENUE, STE 3-D
FT. PIERCE, FL 34950 US

New Mailing Address:

2215 NEBRASKA AVENUE,
SUITE 3-D
FT. PIERCE, FL 34950 US

FEI Number: 65-0349652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COSTELLO, MICHAEL J. M
2215 NEBRASKA AVENUE, STE 3-D
FT. PIERCE, FL 34950 US

Name and Address of New Registered Agent:

COSTELLO, MICHAEL J. M
2215 NEBRASKA AVENUE
SUITE 3-D
FT. PIERCE, FL 34950 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: 03/16/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D
Name: COSTELLO, MICHAEL J MD
Address: 8720 BALLY BUNION ROAD
City-St-Zip: PORT ST LUCIE, FL 34986

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: MICHAEL J. COSTELLO D 03/16/2010
Electronic Signature of Signing Officer or Director Date