

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045026

Entity Name: CENTER FOR FAMILY HEALTH AND PREVENTION, P.A.

Current Principal Place of Business:

3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761

Current Mailing Address:

3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761

FEI Number: 82-0540569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'NEAL, MICHAEL LDO
3165 MCMULLEN BOOTH RD
UNIT C-1
CLEARWATER, FL 33761 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name O'NEAL, MICHAEL DDO
Address 3165 MCMULLEN BOOTH RD
City-State-Zip: CLEARWATER FL 33761

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 L O'NEAL

PRES

04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date