

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000068755

**Entity Name:** CATALYST WALK-IN CLINIC INC

**Current Principal Place of Business:**

1707 E. OAK ST.  
ARCADIA, FL 34266

**Current Mailing Address:**

1707 E. OAK ST.  
ARCADIA, FL 34266

**FEI Number:** 47-3511178

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAMPBELL, J DAVID  
405 TAMiami TRAIL  
PUNTA GORDA, FL 33950 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 P  
Name CHICHESTER-SHEPPERD, SOHAAN A  
Address 1707 E. OAK ST.  
City-State-Zip: ARCADIA FL 34266

*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:** SOHAAN ANDREW CHICHESTER-SHEPPERD

**PRESIDENT**

**04/13/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date