

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002083

FILED
Feb 01, 2012
Secretary of State

Entity Name: PRIMARY PHYSICIANCARE, INC.

Current Principal Place of Business:

1515 MOCKINGBIRD LANE STE 300
CHARLOTTE, NC 28209

New Principal Place of Business:

Current Mailing Address:

1515 MOCKINGBIRD LANE STE 300
CHARLOTTE, NC 28209

New Mailing Address:

P.O. BOX 11088
CHARLOTTE, NC 28220

FEI Number: 56-1449504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: P
Name: TATE, PAUL R
Address: 1515 MOCKINGBIRD LANE STE 300
City-St-Zip: CHARLOTTE, NC 28209

Title: CFO
Name: GUICE, LEE ANN B
Address: 1515 MOCKINGBIRD LANE
City-St-Zip: CHARLOTTE, NC 28209

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: LEE ANN B. GUICE

CFO

02/01/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date