

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000028026

FILED
Apr 29, 2009
Secretary of State

Entity Name: FACULTY PRACTICE SERVICES (FLA.) INC.

Current Principal Place of Business:

3131 SOUTH DIXIE DR.
SUITE 421
DAYTON, OH 45439 US

New Principal Place of Business:

Current Mailing Address:

3131 SOUTH DIXIE DR.
SUITE 421
DAYTON, OH 45439 US

New Mailing Address:

FEI Number: 65-0574855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUAREQUIO, MICHAEL
500 SOUTHEAST 6TH STREET
SUITE 100
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

QUAREQUIO, MICHAEL
900 SOUTHEAST 3RD AVENUE
SUITE 202
FORT LAUDERDALE, FL 33316 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: _____ 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REITER, BARRY S
Address: ONE BANKSVILLE ROAD
City-St-Zip: ARMONK, NY 10504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BARRY S. REITER D 04/29/2009
Electronic Signature of Signing Officer or Director Date