2007 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Jul 23, 2007
Secretary of State

DOCUMENT# A93000000178

Entity Name: DOCTORS' MEDICAL PLAZA ASSOCIATES, LTD.

Current Principal Place of Business:

6450 38TH AVENUE NORTH, SUITE 310
ST. PETERSBURG, FL 33710

New Principal Place of Business:

6450 38TH AVENUE NORTH, SUITE 200
ST. PETERSBURG, FL 33710

Current Mailing Address:

6450 38TH AVENUE NORTH, SUITE 310
ST. PETERSBURG, FL 33710

New Mailing Address:

6450 38TH AVENUE NORTH, SUITE 200
ST. PETERSBURG, FL 33710

FEI Number: 59-3124439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOSS, STEPHEN L
6450 38TH AVENUE NORTH, SUITE 310
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

CARLSON, JEFFREY K
6450 38TH AVENUE NORTH, SUITE 200
ST. PETERSBURG, FL 33710 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: JEFFREY K. CARLSON 07/23/2007
Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION:

Document #: P97000107931
Name: DOCTORS' MEDICAL PLZA MGMT OF PIN CO, INC.
Address: 6450 38TH AVE. NORTH SUITE 310
City-St-Zip: ST. PETERSBURG, FL 33710

ADDRESS CHANGES ONLY:

Address: 6450 38TH AVE. NORTH SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33710

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JEFFREY K. CARLSON DR. 07/23/2007
Electronic Signature of Signing General Partner Date