

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072374

Entity Name: G. SUNIL MD P.A

FILED
Jan 06, 2006
Secretary of State

Current Principal Place of Business:

9200 BONITA BEACH RD SE
SUITE 109
BONITA SPRINGS, FL 34135

Current Mailing Address:

9200 BONITA BEACH RD SE
SUITE 109
BONITA SPRINGS, FL 34135

New Principal Place of Business:

9240 BONITA BEACH RD SE
SUITE 2206
BONITA SPRINGS, FL 34135

New Mailing Address:

9240 BONITA BEACH RD SE
SUITE 2206
BONITA SPRINGS, FL 34135

FEI Number: 13-4259068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNIL, PARVATHY
1937 CRESTVIEW WAY
#172
NAPLES, FL 34119 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUNIL, GOPINATH S MD
Address: 9200 BONITA BEACH RD SE, SUITE 109
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: SUNIL, GOPINATH S MD
Address: 9240 BONITA BEACH RD SE, SUITE 2206
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the 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: GOPINATH SUNIL M.D.

DR

01/06/2006

Electronic Signature of Signing Officer or Director

Date