

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000082409

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: WEST COAST EAR, NOSE & THROAT, INC.

## Current Principal Place of Business:

1330 S FT HARRISON  
CLEARWATER, FL 33756

## New Principal Place of Business:

## Current Mailing Address:

1330 S FT HARRISON  
SUITE A  
CLEARWATER, FL 33756

## New Mailing Address:

1330 S FT HARRISON  
CLEARWATER, FL 33756

FEI Number: 59-3341738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARNA, JAMES MD  
1840 MEASE DRIVE  
SUITE 403  
SAFETY HARBOR, FL 34695 US

## Name and Address of New Registered Agent:

BARNA, JAMES MD  
3190 MC MULLEN BOOTH RD  
STE 100  
CLEARWATER, FL 33761 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:

01/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ALIDINA, ARIF A  
Address: 1840 MEASE DR., SUITE 403  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D ( ) Delete  
Name: COHEN, LANCE M.  
Address: 1330 S FT HARRISON  
City-St-Zip: CLEARWATER, FL 34616

Title: D ( ) Delete  
Name: BARNA, JAMES S  
Address: 1840 MEASE DR., SUITE 403  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D ( ) Delete  
Name: MILLER, MITCHELL  
Address: 1330 S FT HARRISON  
City-St-Zip: CLEARWATER, FL 34616

Title: D ( ) Delete  
Name: ANTHONY, STEVEN  
Address: 8787 BRYAN DAIRY RD., STE. 340  
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete  
Name: STEINIGER, JOSEPH  
Address: 11031 49 HWY 19 NO BLDG 1 STE 104  
City-St-Zip: PORT RICHEY, FL 34668

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALIDINA, ARIF A  
Address: 3190 MC MULLEN BOOTH RD STE 100  
City-St-Zip: CLEARWATER, FL 33761

Title: D (X) Change ( ) Addition  
Name: COHEN, LANCE M.  
Address: 1330 S FT HARRISON  
City-St-Zip: CLEARWATER, FL 33756

Title: D (X) Change ( ) Addition  
Name: BARNA, JAMES S  
Address: 3190 MC MULLEN BOOTH RD STE 100  
City-St-Zip: CLEARWATER, FL 33761

Title: D (X) Change ( ) Addition  
Name: MILLER, MITCHELL  
Address: 1330 S FT HARRISON  
City-St-Zip: CLEARWATER, FL 33756

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

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

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: JAMES BARNA, MD

DR

01/17/2007

Electronic Signature of Signing Officer or Director

Date