

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S02678

FILED
Mar 28, 2007
Secretary of State

Entity Name: VINCENT DI CARLO, M.D., & ASSOCIATES, P.A.

Current Principal Place of Business:

3903 S. WESTSHORE BLVD
TAMPA, FL 33611

New Principal Place of Business:

2835 W. DE LEON ST.
SUITE #205
TAMPA, FL 33609

Current Mailing Address:

3903 S. WESTSHORE BLVD
TAMPA, FL 33611

New Mailing Address:

2835 W. DE LEON ST.
SUITE #205
TAMPA, FL 33609

FEI Number: 59-3067346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OEHLER, ANGELA S
3903 S WESTSHORE BLVD
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

OEHLER, ANGELA S
2835 W. DE LEON ST.
SUITE #205
TAMPA, FL 33609 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: ANGELA OEHLER

03/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARNER, ROSANNA M.D.
Address: 3903 S. WESTSHORE BLVD.
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARNER, ROSANNA M.D.
Address: 2835 W. DE LEON ST., #205
City-St-Zip: TAMPA, FL 33609

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: ROSANNA GARNER, M.D.

P

03/28/2007

Electronic Signature of Signing Officer or Director

Date