

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600401

FILED
Jan 15, 2008
Secretary of State

Entity Name: ANTHONY A. FERNANDEZ, M.D., P.A.

Current Principal Place of Business:

4600 N HABANA AVE STE 16
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4600 N HABANA AVE STE 16
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-1217914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, ANTHONY A.
4600 NORTH HABANA AVENUE
SUITE 16
TAMPA, FL US

Name and Address of New Registered Agent:

FERNANDEZ, ANTHONY A.
4600 NORTH HABANA AVE
SUITE 16
TAMPA, FL 33614 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: ANTHONY FERNANDEZ MD PA

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FERNANDEZ, ANTHONY A. .
Address: 4600 N. HABANA AVENUE
City-St-Zip: TAMPA, FL

Title: SD () Delete
Name: ECHEVARRIA, EMILIO D. .
Address: 4600 N HAVANA AVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: DOMINGUEZ, GERALD H.,
Address: 4600 N HABANA AVE
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FERNANDEZ, ANTHONY A. .
Address: 4600 N. HABANA AVE STE 16
City-St-Zip: TAMPA, FL 33614

Title: SD (X) Change () Addition
Name: ECHEVARRIA, EMILIO D. .
Address: 4600 N HAVANA AVE STE 16
City-St-Zip: TAMPA, FL 33614

Title: D (X) Change () Addition
Name: DOMINGUEZ, GERALD H.,
Address: 4600 N HABANA AVE STE 16
City-St-Zip: TAMPA, FL 33614

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: ANTHONY A FERNANDEZ MD PA

PTD

01/15/2008

Electronic Signature of Signing Officer or Director

Date