

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673248

FILED
Feb 29, 2004
Secretary of State

Entity Name: STEPHEN L. BERKES, M.D., P.A.

Current Principal Place of Business:

5904 POINTE WEST BLVD.
BRADENTON, FL 34209

New Principal Place of Business:

5902 POINTE WEST BLVD.
BRADENTON, FL 34209

Current Mailing Address:

5904 POINTE WEST BLVD.
BRADENTON, FL 34209

New Mailing Address:

5902 POINTE WEST BLVD.
BRADENTON, FL 34209

FEI Number: 59-2002361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERKES, STEPHEN L
5904 POINT WEST BLVD
BRADENTON, FL 34209

Name and Address of New Registered Agent:

BERKES, STEPHEN L
5902 POINT WEST BLVD
BRADENTON, FL 34209

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: STEPHEN L BERKES MD

02/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BERKES, STEPHEN L,
Address: 5904 POINT WEST BLVD.
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BERKES, STEPHEN L,
Address: 5902 POINT WEST BLVD.
City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN L BERKES

PRES

02/29/2004

Electronic Signature of Signing Officer or Director

Date