

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 697014

FILED  
Feb 06, 2008  
Secretary of State

Entity Name: DENIS C.I. JOHNSON, M.D., P.A.

## Current Principal Place of Business:

5111 N. ARMENIA AVE  
TAMPA, FL 33603

## New Principal Place of Business:

## Current Mailing Address:

5111 N. ARMENIA AVE  
TAMPA, FL 33603

## New Mailing Address:

FEI Number: 59-2124932

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, BARBARA  
5111 N. ARMENIA AVE  
TAMPA, FL 33603 US

## Name and Address of New Registered Agent:

JOHNSON, DENIS  
5111 N. ARMENIA AVE  
TAMPA, FL 33603 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: DENIS JOHNSON

02/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JOHNSON, DENIS C.I.,  
Address: 5111 N. ARMENIA AVE  
City-St-Zip: TAMPA, FL 33603

Title: P ( ) Delete  
Name: JOHNSON, BARBARA  
Address: 5111 N. ARMENIA AVE  
City-St-Zip: TAMPA, FL 33603

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: JOHNSON, DUANE  
Address: 5111 N. ARMENIA AVE  
City-St-Zip: TAMPA, FL 33603

Title: P ( ) Change (X) Addition  
Name: LEWIS, KEMBA  
Address: 5502 TERRAIN DE GOLF DR  
City-St-Zip: LUTZ, FL 33558

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: DENIS JOHNSON

D

02/06/2008

Electronic Signature of Signing Officer or Director

Date