

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002853

FILED
Feb 16, 2012
Secretary of State

Entity Name: TAMPA BAY PHYSICIANS ALLIANCE CORPORATION

Current Principal Place of Business:

7936 OFFICE PARK BLVD STE A
BATON ROUGE, LA 70809

New Principal Place of Business:

Current Mailing Address:

7936 OFFICE PARK BLVD STE A
BATON ROUGE, LA 70809

New Mailing Address:

FEI Number: 20-0182751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, JOHN
5526 TERRAIN DE GOLF DR
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP
Name: CRANOR, KENNETH
Address: 7936 OFFICE PARK BLVD STE A
City-St-Zip: BATON ROUGE, LA 70809

Title: VC
Name: WALKER, EDWIN
Address: 7936 OFFICE PARK BLVD STE A
City-St-Zip: BATON ROUGE, LA 70809

Title: D
Name: MENCER, ERNEST
Address: 7936 OFFICE PARK BLVD STE A
City-St-Zip: BATON ROUGE, LA 70809

Title: D
Name: WALL, WILLIAMS
Address: 7936 OFFICE PARK BLVD STE A
City-St-Zip: BATON ROUGE, LA 70809

Title: VST
Name: WOODS, JOHN
Address: 7936 OFFICE PARK BLVD STE A
City-St-Zip: BATON ROUGE, LA 70809

I hereby 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 all other like empowered.

SIGNATURE: JOHN WOODS

VP

02/16/2012

Electronic Signature of Signing Officer or Director

Date