

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F64797

FILED  
Jan 23, 2008  
Secretary of State

Entity Name: V.V. SHANTHARAM, M.D., P.A.

## Current Principal Place of Business:

2585 HERSCHEL STREET  
JACKSONVILLE, FL 32204

## New Principal Place of Business:

## Current Mailing Address:

2585 HERSCHEL STREET  
JACKSONVILLE, FL 32204

## New Mailing Address:

12474 MANDARIN ROAD  
JACKSONVILLE, FL 32223

FEI Number: 59-2165427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

V.V. SHANTHARAM, M.D.  
2585 HERSCHEL STREET  
JACKSONVILLE, FL 32204 US

## Name and Address of New Registered Agent:

V.V. SHANTHARAM, M.D.  
12474 MANDARIN ROAD  
JACKSONVILLE, FL 32223 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:

01/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDST ( ) Delete  
Name: SHANTHARAM, V V MD,  
Address: 2585 HERSCHEL STREET  
City-St-Zip: JACKSONVILLE, FL 32204

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change ( ) Addition  
Name: SHANTHARAM, V V MD,  
Address: 12474 MANDARIN ROAD  
City-St-Zip: JACKSONVILLE, FL 32223

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: V V SHANTHARAM

PDST

01/23/2008

Electronic Signature of Signing Officer or Director

Date