

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G51028

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** FRANCISCO B. GOMES, M.D., P.A.

**Current Principal Place of Business:**

4221 NORTH HIMES  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 18126  
TAMPA, FL 336798126

**New Mailing Address:**

FEI Number: 59-2307723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOMES, FRANCISCO B DR  
4221 N HIMES  
TAMPA, FL 33607 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PA  
Name: GOMES, FRANCISCO B MD  
Address: 730 SUNSET COVE  
City-St-Zip: MADEIRA BEACH, FL 33708

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: FRANCISCO B GOMES

MD

01/09/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date