

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H78254

FILED
Feb 15, 2007
Secretary of State

Entity Name: RENAL STONE CENTER MANAGEMENT, INC.

Current Principal Place of Business:

6002 49TH ST N
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

6002 49TH ST N
ST. PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: 59-2584087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YORK, WOODY N.
1223 ROXMER RD
TAMPA, FL 33606 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: D () Delete
Name: YORK, WOODY N.,
Address: 1223 ROXMER RD
City-St-Zip: TAMPA, FL

Title: TD () Delete
Name: ROSS, T. JOHNSON,
Address: 11011 JEFFORDS ST.
City-St-Zip: CLEARWATER, FL

Title: VD () Delete
Name: KARP, R
Address: 500 VONDERBURG DR
City-St-Zip: BRANDON, FL

Title: PD () Delete
Name: GORDON, MARK R
Address: 601 7TH STREET S
City-St-Zip: ST PETERSBURG, FL 33701

Title: SD () Delete
Name: THRO, JOSEPH G
Address: 530 S NOKOMIS AVE
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK R. GORDON

P

02/15/2007

Electronic Signature of Signing Officer or Director

_____ Date