

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002257

FILED  
Mar 16, 2007  
Secretary of State

Entity Name: PODIATRY NETWORK OF FLORIDA, INC.

## Current Principal Place of Business:

1919 SWANN AVENUE  
TAMPA, FL 33606 US

## New Principal Place of Business:

2835 WEST DELEON  
SUITE 101  
TAMPA, FL 33609 US

## Current Mailing Address:

1919 SWANN AVENUE  
TAMPA, FL 33606 US

## New Mailing Address:

2835 WEST DELEON STREET  
SUITE 101  
TAMPA, FL 33609 US

FEI Number: 59-3244840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTIN PORT  
2835 W DELEON ST STE 101  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

PORT, MARTIN PRESIDE  
2835 WEST DELEON STREET  
SUITE 101  
TAMPA, FL 33609 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: MARTIN PORT

03/16/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: OKUN, SETH J  
Address: 1919 SWANN AVENUE  
City-St-Zip: TAMPA, FL

Title: V ( ) Delete  
Name: LABOHN, SCOTT  
Address: 1919 SWANN AVE  
City-St-Zip: TAMPA, FL 33606

Title: P ( ) Delete  
Name: PORT, MARTIN  
Address: 1919 SWANN AVENUE  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: CREIGHTON, ROBERT  
Address: 1919 SWANN AVENUE  
City-St-Zip: TAMPA, FL 33606

Title: S ( ) Delete  
Name: FLEETER, MICHAEL  
Address: 1419 SWANN AVENUE  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: FRIEDMAN, KENNETH  
Address: 1919 SWANN AVNEUE  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: CREIGHTON, ROBERT  
Address: 2835 WEST DELEON STREET, SUITE 101  
City-St-Zip: TAMPA, FL 33609

Title: S (X) Change ( ) Addition  
Name: LABOHN, SCOTT  
Address: 2835 WEST DELEON STREET, SUITE 101  
City-St-Zip: TAMPA, FL 33609

Title: P (X) Change ( ) Addition  
Name: PORT, MARTIN  
Address: 2835 WEST DELEON STREET, SUITE 101  
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change ( ) Addition  
Name: CREIGHTON, ROBERT  
Address: 2835 WEST DELEON, SUITE 101  
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change ( ) Addition  
Name: FLEETER, MICHAEL  
Address: 2835 WEST DELEON STREET, SUITE 101  
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change ( ) Addition  
Name: FRIEDMAN, KENNETH  
Address: 2835 WEST DELEON STREET, SUITE 101  
City-St-Zip: TAMPA, FL 33609

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN PORT

P

03/16/2007

Electronic Signature of Signing Officer or Director

Date