

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026196

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: TAMPA MEDICAL PARTNERS INC.

## Current Principal Place of Business:

8140 PICTON WAY, STE 103  
SUITE 103  
NEW PORT RICHEY, FL 34655 US

## New Principal Place of Business:

2228 US HIGHWAY 19  
HOLIDAY, FL 34691 US

## Current Mailing Address:

8140 PICTON WAY, STE 103  
SUITE 103  
NEW PORT RICHEY, FL 34655 US

## New Mailing Address:

35111 US HIGHWAY 19  
PALM HARBOR, FL 34684 US

FEI Number: 59-3634449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KRUDO, LOUIS  
8140 PICTON WAY  
SUITE 103  
NEW PORT RICHEY, FL 34655 US

## Name and Address of New Registered Agent:

HELLER, SAMUEL  
35111 US HIGHWAY 19  
PALM HARBOR, FL 34684 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: SAMUEL HELLER

04/30/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: LEVINE, GARY D.O.  
Address: 35111 US HIGHWAY 19  
City-St-Zip: PALM HARBOR, FL 34684 US

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: GARY LEVINE

CEO

04/30/2012

Electronic Signature of Signing Officer or Director

Date