

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026510

Entity Name: SANJAY K.MADAN MD PA

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

1840 MEASE DR.
402
SAFETY HARBOR, FL 34695

Current Mailing Address:

207 HIGHLAND WOODS DRIVE
SAFETY HARBOR, FL 34695

New Principal Place of Business:

3190 MCMULLEN BOOTH ROAD
201
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-3630918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADAN, SANJAY K
207 HIGHLAND WOODS DRIVE
SAFETY HARBOR, FL 34695 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: PD () Delete
Name: MADAN, SANJAY K DR
Address: 1840 MEASE DRIVE, SUITE 402
City-St-Zip: SAFETY HARBOR, FL 346951098

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MADAN, SANJAY K DR
Address: 3190 MCMULLEN BOOTH ROAD, SUITE 201
City-St-Zip: CLEARWATER, FL 33761

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: SANJAY MADAN

MD

01/05/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date