

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035136

FILED
Jun 16, 2005
Secretary of State

Entity Name: ANDREA FARRIER, D.O., PA

Current Principal Place of Business:

217 CRYSTAL GROVE BLVD.
SUITE 102
LUTZ, FL 33548 US

New Principal Place of Business:

Current Mailing Address:

217 CRYSTAL GROVE BLVD.
SUITE 102
LUTZ, FL 33548 US

New Mailing Address:

FEI Number: 59-3636593 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FARRIER, SEAN E M.D.
4620 W. BEACH PARK DR
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

CAMPBELL, PHILIP JR
101 EAST KENNEDY BLVD
SUITE 2800
TAMPA, FL 33602 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: C. PHILIP CAMPBELL, JR.

06/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARRIER, ANDREA D.O.
Address: 4620 W. BEACH PARK DR
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: GROVER, SANJEEV M.D.
Address: 217 CRYSTAL GROVE BLVD., STE. 102
City-St-Zip: LUTZ, FL 33548

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SANJEEV GROVER, M.D.

P

06/16/2005

Electronic Signature of Signing Officer or Director

Date