

2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2008
Secretary of State**

DOCUMENT# P00000088452

Entity Name: ELADIO DIEGUEZ MD PA

Current Principal Place of Business:

5345 SW COLLGE ROAD
UNIT 401
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

PO BOX 770967
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-3669759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIEGUEZ, ELADIO
5345 SW COLLEGE ROAD
UNIT 401
OCALA, FL 344745637 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: PSD () Delete
Name: DIEGUEZ, ELADIO
Address: 5345 SW COLLEGE ROAD, SUITE 401
City-St-Zip: Ocala, FL 344745637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: ELADIO DIEGUEZ MD PA

PSD

01/17/2008

Electronic Signature of Signing Officer or Director

_____ Date