

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109305

Entity Name: PINELLAS PRIMARY CARE, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

1099 5TH AVE NORTH
STE 320
ST PETERSBURG, FL 33705 US

Current Mailing Address:

1099 5TH AVE NORTH
STE 320
ST PETERSBURG, FL 33705 US

FEI Number: 59-3683218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANARA, JAYSUKHLAL V MD
1099 5TH AVE NORTH
STE 320
ST PETERSBURG, FL 33705 US

New Principal Place of Business:

2299 9TH AVENUE NORTH
STE 1F
ST PETERSBURG, FL 33713 US

New Mailing Address:

2299 9TH AVENUE NORTH
STE 1F
ST PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

PANARA, JAYSUKHLAL V MD
2299 9TH AVENUE NORTH
STE 1F
ST PETERSBURG, FL 33713 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: JAYSUKHLAL V PANARA

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PANARA, JAYSUKHAL V MD
Address: 7876 LANTANA CREEK RD
City-St-Zip: LARGO, FL 33777

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: JAYSUKHLAL V PANARA

PD

01/28/2009

Electronic Signature of Signing Officer or Director

Date