2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007
Secretary of State

DOCUMENT# P01000010924

Entity Name: TRINA E. ESPINOLA, M.D., P.A.

Current Principal Place of Business:

603 SEVENTH ST. S., STE, 580
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

603 SEVENTH ST. S., STE, 580
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-3694640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BYRNE, JAMES A ESQ.
540 - 4TH ST. NORTH
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

FELIX, MARK R MANAGER
603 7TH STREET S., SUITE 580
ST. PETERSBURG, FL 33701 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: MARK FELIX 01/25/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ESPINOLA, TRINA E MD
Address: 603 7TH STREET S. STE 580
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP ( ) Delete
Name: ESPINOLA, TRINA E MD
Address: 603 7TH STREET S STE 580
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: T ( ) Delete
Name: ESPINOLA, TRINA E MD
Address: 603 7TH STREET S. STE 580
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S ( ) Delete
Name: ESPINOLA, TRINA E MD
Address: 603 7TH STREET S. STE 580
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARK FELIX MGR 01/25/2007
Electronic Signature of Signing Officer or Director Date