

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000016312

FILED
Apr 26, 2005
Secretary of State

Entity Name: WOUND HEALING ASSOCIATES OF TAMPA, INC.

Current Principal Place of Business:

13014 NORTH DALE MABRY HIGHWAY SUITE 610
TAMPA, FL 33618

New Principal Place of Business:

13014 NORTH DALE MABRY HIGHWAY
#610
TAMPA, FL 33618

Current Mailing Address:

13014 NORTH DALE MABRY HIGHWAY SUITE 610
TAMPA, FL 33618

New Mailing Address:

13014 NORTH DALE MABRY HIGHWAY
#610
TAMPA, FL 33618

FEI Number: 59-3698844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKETT, DONALD E DR.
10144 DEERCLIFF DR.
TAMPA, FL 33647 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: BECKETT, DONALD E DR.
Address: 10144 DEERCLIFF DR.
City-St-Zip: TAMPA, FL 33647

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 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: DONALD E. BECKETT

PD

04/26/2005

Electronic Signature of Signing Officer or Director

Date