

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025439

FILED  
Feb 23, 2005  
Secretary of State

Entity Name: CAPTIVA HEALTHCARE MANAGEMENT, INC.

## Current Principal Place of Business:

801 SOUTH BROAD STREET  
BROOKSVILLE, FL 34601

## New Principal Place of Business:

## Current Mailing Address:

801 SOUTH BROAD STREET  
BROOKSVILLE, FL 34601

## New Mailing Address:

FEI Number: 32-0002542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOODRUFF, RANDALL K  
801 SOUTH BROAD STREET  
BROOKSVILLE, FL 34601 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: D ( ) Delete  
Name: PAGIDIPATI, DEVAIAH  
Address: 2955 SE THIRD COURT  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: PAGIDIPATI, SIDDHARTHA  
Address: 2910 SW 7TH AVE  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: WOODRUFF, RANDALL  
Address: 801 S BROAD STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: D ( ) Change (X) Addition  
Name: PAGIDIPATI, RAHULDEV  
Address: 1321 SW 42ND STREET  
City-St-Zip: OCALA, FL 34474

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: DEVAIAH PAGIDIPATI

D

02/23/2005

Electronic Signature of Signing Officer or Director

Date