

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000065634

Entity Name: K. SWAMINTHAN, MD PA

**FILED**  
**Jan 09, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1054 S.W. 1ST AVENUE  
OCALA, FL 344744263

**New Principal Place of Business:**

1054 S.W. 1ST AVENUE  
OCALA, FL 344744263 US

**Current Mailing Address:**

150 SE 17TH ST  
#504  
OCALA, FL 34471

**New Mailing Address:**

150 SE 17TH ST  
#504  
OCALA, FL 34471 US

FEI Number: 59-3727405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SWAMINATHAN, KRISHNASWAMY  
1054 S.W. 1ST AVENUE  
OCALA, FL 34474 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: PS ( ) Delete  
Name: SWAMINATHAN, KRISHNASWAMY  
Address: 1054 S.W. 1ST AVENUE  
City-St-Zip: Ocala, FL 34474 US

**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 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: KRISHNASWAMY SWAMINATHAN

PS

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date