


2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Feb 01, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000089254  
1. Entity Name  
TEAMPATH, INC.



Principal Place of Business  
2672 CLUBHOUSE DR. NORTH  
CLEARWATER, FL 33761

Mailing Address  
2672 CLUBHOUSE DR. NORTH  
CLEARWATER, FL 33761



01182007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
22-3828745 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
RUBIN, BARRY L  
2672 CLUBHOUSE DR. NORTH  
CLEARWATER, FL 33761

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUBIN, BARRY L
STREET ADDRESS	2672 CLUBHOUSE DR. NORTH
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000614933  
02/06/07-80052-002 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barry Louis Rubin [Signature] 1/31/07 727-763-8080  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #